

**FISCAL YEAR 2019**

**MARK UP**

**DEPARTMENT OF SOCIAL SERVICES  
DIVISION OF MO HEALTHNET**

**HOUSE BILL 2011**

**99<sup>th</sup> General Assembly  
Second Regular Session**

*Prepared by Senate Appropriations Committee Staff*

DEPARTMENT OF SOCIAL SERVICES

**Section 11.400**      **MO HealthNet Division – Administration**

Book 5, Page 140

The MO HealthNet staff oversees the operation of the Mo HealthNet program. The division is organized into five sections: Administration, Program Management, Finance, Information Services, and Quality Services.

**Legal Base:** RSMo 208.201; Federal – Social Security Act Section Number: 1902(a) (4) and 42 CFR Part 432  
**Funding Sources:** General Revenue, Federal, Pharmacy Rebates (REBATE), Pharmacy Reimbursement Allowance, MO Rx Plan, Health Initiatives (HIF); Nursing Facility Quality of Care (NFQC); and Third-Party Liability Collections (TPL)  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reduction: (\$9,860) (FED \$4,930 EE & OTH \$4,930 EE) core reduction of one-time expenditures for Ground Emergency Medical Transportation (GEMT)  
Core transfer out: (\$7,742) GR PS and (0.16) GR FTE transferred out to HB 12.005 Office of the Governor

**GOVERNOR:**

Same as Department – no additional core changes

**HOUSE:**

Core reallocation in: \$16,497,296 (GR \$8,248,648 EE & FED \$8,248,648 EE) reallocated in from various Medicaid sections for the administration of such programs

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400												
MO HEALTHNET ADMIN - 90512C												
CORE												
PERSONAL SERVICES	10,009,127	234.11	9,610,430	210.65	10,076,659	225.86	10,068,917	225.70	10,068,917	225.70	10,068,917	225.70
GENERAL REVENUE	2,673,274	64.53	2,593,084	56.14	2,651,172	64.28	2,643,430	64.12	2,643,430	64.12	2,643,430	64.12
FEDERAL FUNDS	5,503,213	124.97	5,444,863	120.50	5,548,030	115.97	5,548,030	115.97	5,548,030	115.97	5,548,030	115.97
OTHER FUNDS	1,832,640	44.61	1,572,483	34.01	1,877,457	45.61	1,877,457	45.61	1,877,457	45.61	1,877,457	45.61
EXPENSE & EQUIPMENT	4,633,198	0.00	3,434,124	0.00	4,643,802	0.00	4,633,942	0.00	4,633,942	0.00	21,131,238	0.00
GENERAL REVENUE	693,067	0.00	672,955	0.00	693,067	0.00	693,067	0.00	693,067	0.00	8,941,715	0.00
FEDERAL FUNDS	3,333,341	0.00	2,211,531	0.00	3,338,643	0.00	3,333,713	0.00	3,333,713	0.00	11,582,361	0.00
OTHER FUNDS	606,790	0.00	549,638	0.00	612,092	0.00	607,162	0.00	607,162	0.00	607,162	0.00
PROGRAM-SPECIFIC	1,729	0.00	0	0.00	1,729	0.00	1,729	0.00	1,729	0.00	1,729	0.00
GENERAL REVENUE	699	0.00	0	0.00	699	0.00	699	0.00	699	0.00	699	0.00
FEDERAL FUNDS	1,030	0.00	0	0.00	1,030	0.00	1,030	0.00	1,030	0.00	1,030	0.00
TOTAL	\$14,644,054	234.11	\$13,044,554	210.65	\$14,722,190	225.86	\$14,704,588	225.70	\$14,704,588	225.70	\$31,201,884	225.70

Pay Plan - 0000012												
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	120,389	0.00	167,885	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	34,791	0.00	47,875	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	62,726	0.00	86,633	0.00

Committee Markup Annual		FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
		FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400													
MO HEALTHNET ADMIN - 90512C													
Pay Plan - 0000012													
PERSONAL SERVICES		0	0.00	0	0.00	0	0.00	0	0.00	120,389	0.00	167,885	0.00
OTHER FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	22,872	0.00	33,377	0.00
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$120,389	0.00	\$167,885	0.00
Governor recommends \$650 for employees making \$50,000 or less. House recommends \$700 for employees making \$70,000 or less and 1% increase for employees making over \$70,000.													

Electronic Visit Verification - 1886024													
PERSONAL SERVICES		0	0.00	0	0.00	0	0.00	0	0.00	78,000	1.00	78,000	1.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	0	0.00	39,000	0.50	39,000	0.50
FEDERAL FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	39,000	0.50	39,000	0.50
EXPENSE & EQUIPMENT		0	0.00	0	0.00	0	0.00	0	0.00	5,338	0.00	5,338	0.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	0	0.00	2,669	0.00	2,669	0.00
FEDERAL FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	2,669	0.00	2,669	0.00
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$83,338	1.00	\$83,338	1.00
CMS established a requirement for all states to use an Electronic Visit Verification (EVV) system, in accordance with the 21st Century CURES Act for Personal Care Services by January 1, 2019. This request includes funding to develop the RFP and the required staff to ensure the new systems meets CMS requirements.													

Advancing MMIS Technology - 1886025													
PERSONAL SERVICES		0	0.00	0	0.00	0	0.00	0	0.00	435,448	7.00	83,964	2.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	0	0.00	217,724	3.50	41,982	1.00
FEDERAL FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	217,724	3.50	41,982	1.00
EXPENSE & EQUIPMENT		0	0.00	0	0.00	0	0.00	0	0.00	37,366	0.00	11,208	0.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	0	0.00	18,683	0.00	5,604	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400												
MO HEALTHNET ADMIN - 90512C												
Advancing MMIS Technology - 1886025												
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	37,366	0.00	11,208	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	18,683	0.00	5,604	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$472,814	7.00	\$95,172	2.00
Increased staff needed for MMIS operations, HIPPA Mandated Transactions Upgrade, GR need for Conduent Pharmacy Monthly Operations and Inpatient Certification, and GR need for Infocrossing Monthly Operations.												

Director Salary Adjustments - 1886039												
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	118,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	59,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	59,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$118,000	0.00
This decision item increases the DSS director salary to \$142,000 from \$128,244 in Section 11.005, and increases the MOHealthNet director salary to \$225,000 from currently advertised rate of \$107,000 in Section 11.400.												

MC FRA Implementation - 1886040												
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	42,780	1.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	21,390	0.50

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.400												
MO HEALTHNET ADMIN - 90512C												
MC FRA Implementation - 1886040												
PERSONAL SERVICES	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	42,780	1.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	21,390	0.50
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$42,780	1.00

This decision item represents funding for 1 FTE to implement the Managed Care FRA, if passed by the General Assembly in 2018. If a Managed Care FRA is not passed, this amount and FTE will be reduced the following fiscal year.

TOTAL - MO HEALTHNET ADMIN	\$14,644,054	234.11	\$13,044,554	210.65	\$14,722,190	225.86	\$14,704,588	225.70	\$15,381,129	233.70	\$31,709,059	229.70
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DEPARTMENT OF SOCIAL SERVICES

Section 11.405      MO HealthNet Division – Pharmacy Program (Clinical Services) Management

Book 5, Page 155

This section provides funding for the contractor costs that support the Pharmacy and Clinical Services programs. Funding is used for cost containment initiatives and clinical policy decision-making to enhance efforts to provide appropriate and quality medical care to participants. The Division of Medical Services seeks to aid recipients and providers in their efforts to access the Medicaid program by utilizing contractor resources effectively.

**Legal Base:** RSMo 208.152 and 208.201; Federal – Social Security Act Section Number: 1903(a) and 42 CFR Part 433.15  
**Funding Sources:** General Revenue, Federal, MO Rx Plan, and Third Party Liability (TPL) fund  
**FY 2018 GR W/H:** \$0

CORE ADJUSTMENTS:

DEPARTMENT:  
No core changes

GOVERNOR:  
No core changes

HOUSE:  
No core changes

SENATE:

CONFERENCE:



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.405												
CLINICAL SRVC MGMT - 90516C												
CORE												
EXPENSE & EQUIPMENT	15,161,455	0.00	12,831,250	0.00	15,161,455	0.00	15,161,455	0.00	15,161,455	0.00	15,161,455	0.00
GENERAL REVENUE	461,917	0.00	448,059	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00
FEDERAL FUNDS	12,214,032	0.00	11,208,758	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00
OTHER FUNDS	2,485,506	0.00	1,174,433	0.00	2,485,506	0.00	2,485,506	0.00	2,485,506	0.00	2,485,506	0.00
TOTAL	\$15,161,455	0.00	\$12,831,250	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00
TOTAL - CLINICAL SRVC MGMT	\$15,161,455	0.00	\$12,831,250	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00	\$15,161,455	0.00

DEPARTMENT OF SOCIAL SERVICES

**Section 11.410**      **MO HealthNet Division – Women and Minority Health Care Outreach**

Book 5, Page 164

This section provides client outreach and education about the MO HealthNet program and reduces disparities in healthcare access for women and minority populations.

**Legal Base:** RSMo 208.152 and 208.201; Federal – Social Security Act Section Number: 1903(a) and 42 CFR Part 433.15  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**

## Committee Markup Annual

**FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.410												
WOMEN & MINORITY OUTREACH - 90513C												
CORE												
EXPENSE & EQUIPMENT	1,098,421	0.00	1,027,804	0.00	1,098,421	0.00	1,098,421	0.00	1,098,421	0.00	1,098,421	0.00
GENERAL REVENUE	529,796	0.00	513,902	0.00	529,796	0.00	529,796	0.00	529,796	0.00	529,796	0.00
FEDERAL FUNDS	568,625	0.00	513,902	0.00	568,625	0.00	568,625	0.00	568,625	0.00	568,625	0.00
TOTAL	\$1,098,421	0.00	\$1,027,804	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00

TOTAL - WOMEN & MINORITY OUTREACH	\$1,098,421	0.00	\$1,027,804	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00	\$1,098,421	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.415**      **MO HealthNet Division – Third Party Liability (TPL) Contracts**

Book 5, Page 174

This section provides funding to contract for the identification and collection of resources available to Medicaid recipients from third party sources. The TPL contractors recover from third party sources in cases where liability has not yet been determined, the third party resources were not known at the time of the Medicaid payment and/or for services which are federally mandated to be paid and then pursued for payment, e.g., prenatal medical care, preventive pediatric care, EPSDT and medical support cases.

**Legal Base:** RSMo 208.153 and 208.215; Federal – Social Security Act Section Number: 1902, 1903, 1906, 1912, 1917 and 42 CFR 433 Subpart D

**Funding Sources:** Federal and Third-Party Liability (TPL) Collections

**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.415												
TPL CONTRACTS - 90515C												
CORE												
EXPENSE & EQUIPMENT	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00	6,000,000	0.00
FEDERAL FUNDS	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00
OTHER FUNDS	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00	3,000,000	0.00
TOTAL	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00

TPL Contracts Increase - 1886006

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,250,000	0.00	1,250,000	0.00	1,250,000	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	1,250,000	0.00	1,250,000	0.00	1,250,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00

Increase in contract cost due to new contract terms and increases in recoveries.

TOTAL - TPL CONTRACTS	\$6,000,000	0.00	\$6,000,000	0.00	\$6,000,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.420**      **MO HealthNet Divisions – Information Systems**

Book 5, Page 189

This section provides funding for contractor fees associated with the operation of Missouri's Medicaid Management Information System and the Medicaid Fraud and Abuse Detection system (FADS). MMIS is an automated Medicaid claims payment system.

**Legal Base:** RSMo 208.201; Federal – Social Security Act Section Number: 1903(a) (3), and 42 CFR 433 Subpart C  
**Funding Sources:** General Revenue, Federal, and Healthcare Technology Fund  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

Core reallocation in: \$12,473,664 (GR \$9,043,416 EE & FED \$3,430,248 EE) reallocated in from various Medicaid sections for administration of such programs

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.420 INFORMATION SYSTEMS - 90522C												
CORE												
EXPENSE & EQUIPMENT	67,619,110	0.00	52,918,807	0.00	67,463,130	0.00	67,463,130	0.00	67,463,130	0.00	79,936,794	0.00
GENERAL REVENUE	10,538,940	0.00	11,044,695	0.00	11,777,149	0.00	11,777,149	0.00	11,777,149	0.00	20,820,565	0.00
FEDERAL FUNDS	57,080,170	0.00	39,900,176	0.00	53,664,294	0.00	53,664,294	0.00	53,664,294	0.00	57,094,542	0.00
OTHER FUNDS	0	0.00	1,973,936	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00
PROGRAM-SPECIFIC	13,689,210	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	847,343	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	10,820,180	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	2,021,687	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$81,308,320	0.00	\$52,918,807	0.00	\$67,463,130	0.00	\$67,463,130	0.00	\$67,463,130	0.00	\$79,936,794	0.00

MMIS Contract Extension - 1886005

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,271,966	0.00	1,271,966	0.00	4,271,966	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	395,881	0.00	395,881	0.00	695,881	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	876,085	0.00	876,085	0.00	3,576,085	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,271,966	0.00	\$1,271,966	0.00	\$4,271,966	0.00

Extensions to Infocrossing and Conduent Medicaid Management Information Systems (MMIS) contracts.

Electronic Visit Verification - 1886024

EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	595,000	0.00	595,000	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	59,500	0.00	59,500	0.00

Committee Markup Annual	FY2019 DEPARTMENT OF SOCIAL SERVICES												Regular House Bills
	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.420													
INFORMATION SYSTEMS - 90522C													
Electronic Visit Verification - 1886024													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	595,000	0.00	595,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	535,500	0.00	535,500	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$595,000	0.00	\$595,000	0.00	
CMS established a requirement for all states to use an Electronic Visit Verification (EVV) system, in accordance with the 21st Century CURES Act for Personal Care Services by January 1, 2019. This request includes funding to develop the RFP and the required staff to ensure the new systems meets CMS requirements.													
Advancing MMIS Technology - 1886025													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	0	0.00	9,085,003	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	6,385,003	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	2,700,000	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$9,085,003	0.00	\$0	0.00	
Increased staff needed for MMIS operations, HIPPA Mandated Transactions Upgrade, GR need for Conduent Pharmacy Monthly Operations and Inpatient Certification, and GR need for Infocrossing Monthly Operations.													
TOTAL - INFORMATION SYSTEMS	\$81,308,320	0.00	\$52,918,807	0.00	\$67,463,130	0.00	\$68,735,096	0.00	\$78,415,099	0.00	\$84,803,760	0.00	





DEPARTMENT OF SOCIAL SERVICES

Section 11.425      MO HealthNet Division – Electronic Health Records Incentive

Book 5, Page 205

This section provides funding for Missouri’s MO HealthNet Electronic Health Record (EHR) Incentive program as established by the American Recovery and Reinvestment Act. The EHR Incentive program provides incentive payments for the adoption and meaningful use of certified EHR technology. These incentives are based on the provider’s participation in Medicaid programs. The EHR Incentive program provides payments to eligible professionals and eligible hospitals for efforts to adopt, implement, or upgrade to certified EHR technology. Under the program, eligible professionals can receive up to \$63,750 in incentive payments over 6 years and hospital amounts are based on an established formula. The funding for this program was added to the budget in FY 2012

**Legal Base:** Federal Law - ARRA Section 4201; Federal Regulation – 42 CFR Parts 412,413, 422, & 495  
**Funding Sources:** Federal  
**FY 2018 GR W/H:** N/A

CORE ADJUSTMENTS:

DEPARTMENT:

Core reallocation within: ± \$201,200 FED PSD reallocated to EE within section to more closely align budget with planned expenditures

GOVERNOR:

Core reduction: (\$7,000,000) FED PSD core reduction of excess federal appropriation authority based on planned expenditures for FY 2019

HOUSE:

Same as Governor – no additional core changes

SENATE:

CONFERENCE:

Committee Markup Annual		FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
		FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.425													
ELECTRONIC HLTH RECORDS INCNTV - 90523C													
CORE													
EXPENSE & EQUIPMENT		0	0.00	1,365,058	0.00	1,303,000	0.00	1,504,200	0.00	1,504,200	0.00	1,504,200	0.00
FEDERAL FUNDS		0	0.00	1,365,058	0.00	1,303,000	0.00	1,504,200	0.00	1,504,200	0.00	1,504,200	0.00
PROGRAM-SPECIFIC		40,000,000	0.00	29,701,644	0.00	33,697,000	0.00	33,495,800	0.00	26,495,800	0.00	26,495,800	0.00
FEDERAL FUNDS		40,000,000	0.00	29,701,644	0.00	33,697,000	0.00	33,495,800	0.00	26,495,800	0.00	26,495,800	0.00
TOTAL		\$40,000,000	0.00	\$31,066,702	0.00	\$35,000,000	0.00	\$35,000,000	0.00	\$28,000,000	0.00	\$28,000,000	0.00
TOTAL - ELECTRONIC HLTH RECORDS INCN'		\$40,000,000	0.00	\$31,066,702	0.00	\$35,000,000	0.00	\$35,000,000	0.00	\$28,000,000	0.00	\$28,000,000	0.00

## DEPARTMENT OF SOCIAL SERVICES

**Section 11.430**

**MO HealthNet Division – Money Follows the Person Grant Program**

Book 5, Page 213

This section provides funding the administration of the Money Follows the Person Grant Program. This demonstration grant program aides in the transition of individuals who are elderly, disabled or who have developmental disabilities from nursing facilities or state owned habilitation centers to Home and Community Based Services.

**Legal Base:** Section 6071 of the Federal Deficit Reduction Act of 2005; PL 109-171

**Funding Sources:** Federal Funds

**FY 2018 GR W/H:** N/A

### **CORE ADJUSTMENTS:**

#### **DEPARTMENT:**

Core reallocation within: ± \$25,000 FED EE reallocated to PSD within section to more closely align budget with planned expenditures

#### **GOVERNOR:**

Same as Department – no additional core changes

#### **HOUSE:**

Same as Department – no additional core changes

#### **SENATE:**

#### **CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.430													
MONEY FOLLOWS THE PERSON GRANT - 90524C													
CORE													
EXPENSE & EQUIPMENT	453,277	0.00	450,440	0.00	532,549	0.00	507,549	0.00	507,549	0.00	507,549	0.00	
FEDERAL FUNDS	453,277	0.00	450,440	0.00	532,549	0.00	507,549	0.00	507,549	0.00	507,549	0.00	
PROGRAM-SPECIFIC	79,272	0.00	23,317	0.00	0	0.00	25,000	0.00	25,000	0.00	25,000	0.00	
FEDERAL FUNDS	79,272	0.00	23,317	0.00	0	0.00	25,000	0.00	25,000	0.00	25,000	0.00	
TOTAL	532,549	0.00	473,757	0.00	532,549	0.00	532,549	0.00	532,549	0.00	532,549	0.00	

## DEPARTMENT OF SOCIAL SERVICES

### Section 11.435      MO HealthNet Division – Pharmacy Services

Book 5, Page 223

This section provides Medicaid funding for qualifying prescription drugs supplied by manufacturers for which there exists a rebate agreement between the manufacturer and the state or the federal department of Health and Human Services. In addition, this section provides funding for professional fees for pharmacists.

**Legal Base:** RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1902(a) (12), and 42 CFR 440.120  
**Funding Sources:** General Revenue, Federal, Pharmacy Rebates (REBATE), Health Initiatives (HIF), Pharmacy Federal Reimbursement Allowance (PFRA), Healthy Families Trust Fund Health Care Account (HFTF), Third Party Liability Collections Fund, and Premium Fund  
**FY 2018 GR W/H:** \$0

#### CORE ADJUSTMENTS:

##### DEPARTMENT:

Core reduction: (\$46,594,334) (GR \$14,129,417 PSD & FED \$32,464,917 PSD) core reduction due to anticipated lapse  
(\$13,107,337) FED PSD core reduction of one-time Federal Funds  
Core reallocation within: ±\$200,000 GR PSD reallocated to EE within in section to more closely align budget with planned expenditures

##### GOVERNOR:

Core reduction: (\$66,097,652) (GR \$23,000,000 PSD & FED \$43,097,652 PSD) core reduction from cost containment initiatives  
(\$13,522,978) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
(\$9,600,000) (GR \$3,340,512 PSD & FED \$6,259,488 PSD) core reduction due to adjusting drug claiming payment methodology so that Part D participants' claims are with Medicare dollars  
(\$1,500,000) (GR \$521,955 PSD & FED \$978,045 PSD) core reduction due to outreach to manufacturers requesting rebates on specific medications

##### HOUSE:

Core reallocation out: (\$8,440,285) (GR \$200,000 EE; GR \$4,020,143 PSD; FED \$207,578 EE; & FED \$4,012,564 PSD) reallocated out to MHD Admin & IT sections for administrative functions of such program

##### SENATE:

##### CONFERENCE:

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435												
PHARMACY - 90541C												
CORE												
EXPENSE & EQUIPMENT	207,578	0.00	1,389,739	0.00	207,578	0.00	407,578	0.00	407,578	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	200,000	0.00	200,000	0.00	0	0.00
FEDERAL FUNDS	207,578	0.00	1,389,739	0.00	207,578	0.00	207,578	0.00	207,578	0.00	0	0.00
PROGRAM-SPECIFIC	1,470,131,360	0.00	1,217,466,094	0.00	1,296,430,934	0.00	1,236,529,263	0.00	1,145,808,633	0.00	1,137,775,926	0.00
GENERAL REVENUE	120,721,992	0.00	33,903,608	0.00	124,739,301	0.00	110,409,884	0.00	70,024,439	0.00	66,004,296	0.00
FEDERAL FUNDS	1,004,320,720	0.00	839,959,150	0.00	848,001,020	0.00	802,428,766	0.00	752,093,581	0.00	748,081,017	0.00
OTHER FUNDS	345,088,648	0.00	343,603,336	0.00	323,690,613	0.00	323,690,613	0.00	323,690,613	0.00	323,690,613	0.00
TOTAL	\$1,470,338,938	0.00	\$1,218,855,833	0.00	\$1,296,638,512	0.00	\$1,236,936,841	0.00	\$1,146,216,211	0.00	\$1,137,775,926	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	9,444,869	0.00	3,916,000	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	935,369	0.00	377,587	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	6,069,272	0.00	2,553,349	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	2,440,228	0.00	985,064	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$9,444,869	0.00	\$3,916,000	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,558,962	0.00	2,491,168	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	352,460	0.00	240,202	0.00	0	0.00

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.435													
PHARMACY - 90541C													
Year 2 Asset Limit Increase - 0000017													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,558,962	0.00	2,491,168	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	2,286,989	0.00	1,624,316	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	919,513	0.00	626,650	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$3,558,962	0.00	\$2,491,168	0.00	\$0	0.00	
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.													

MO HEALTHNET GR PICKUP - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	13,107,337	0.00	13,107,337	0.00	13,107,337	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	13,107,337	0.00	13,107,337	0.00	13,107,337	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$13,107,337	0.00	\$13,107,337	0.00	\$13,107,337	0.00	

Funding is required to backfill one-time funds budgeted in FY18. One-time cash sources include enhanced Children's Health Insurance Premium (CHIP) federal match, Healthy Families Trust Fund, Life Sciences Research Trust Fund, and Premium Fund. There are corresponding core reductions associated with this GR pickup.

Pharmacy PMPM Inc-Specialty - 1886011

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	54,629,674	0.00	54,182,785	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	19,524,645	0.00	18,853,984	0.00	0	0.00	



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.435												
PHARMACY - 90541C												
Pharmacy PMPM Inc-Specialty - 1886011												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	54,629,674	0.00	54,182,785	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	35,105,029	0.00	35,328,801	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$54,629,674	0.00	\$54,182,785	0.00	\$0	0.00

An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated specialty PMPM rate of 7.82% is expected in FY19. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects an Express Scripts forecast.

Phrmacy PMPM Inc-Non Specialty - 1886012												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,419,041	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	2,294,165	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	4,124,876	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$6,419,041	0.00	\$0	0.00	\$0	0.00

An increase is needed in the pharmacy program due to increased cost of non-specialty drugs. An estimated non-specialty PMPM rate of 1.15% is expected in FY19. Request reflects an Express Scripts forecast.

FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	13,522,978	0.00	13,522,978	0.00

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.435													
PHARMACY - 90541C													
FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	13,522,978	0.00	13,522,978	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	13,522,978	0.00	13,522,978	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$13,522,978	0.00	\$13,522,978	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - PHARMACY	\$1,470,338,938	0.00	\$1,218,855,833	0.00	\$1,296,638,512	0.00	\$1,324,096,724	0.00	\$1,233,436,479	0.00	\$1,164,406,241	0.00	
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## DEPARTMENT OF SOCIAL SERVICES

### Section 11.435 cont. MO HealthNet Division – Pharmacy Medicare Part D-Clawback

Book 5, Page 241

This section provides funding for a transfer from the Pharmacy section for “Clawback” payments to the federal government. Part D of the Federal Medicare Prescription Drug Act requires states to pay Medicare a portion of the cost of Part D drugs attributable to what would have been paid for by the State absent the Part D drug benefit. Beginning January 1, 2006, the state is required to pay Medicare 90% of an average per person drug cost for each of the state’s full-benefit dual eligible individuals for each month.

**Legal Basis:** Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.

**Funding Sources:** General Revenue

**FY 2018 GR W/H:** \$0

### CORE ADJUSTMENTS:

#### DEPARTMENT:

Core reduction: (\$1,625,598) GR PSD core reduction due to anticipated lapse

#### GOVERNOR:

Same as Department – no additional core changes

#### HOUSE:

Same as Department – no additional core changes

#### SENATE:

#### CONFERENCE:

Committee Markup Annual			FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills		
			FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
			DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.435															
PHARMACY-MED PART D-CLAWBACK - 90543C															
CORE															
PROGRAM-SPECIFIC			211,018,979	0.00	211,018,979	0.00	228,376,331	0.00	226,750,733	0.00	226,750,733	0.00	226,750,733	0.00	
GENERAL REVENUE			198,071,188	0.00	198,071,188	0.00	228,376,331	0.00	226,750,733	0.00	226,750,733	0.00	226,750,733	0.00	
FEDERAL FUNDS			12,947,791	0.00	12,947,791	0.00	0	0.00	0	0.00	0	0.00	0	0.00	
TOTAL			\$211,018,979	0.00	\$211,018,979	0.00	\$228,376,331	0.00	\$226,750,733	0.00	\$226,750,733	0.00	\$226,750,733	0.00	

Clawback Increase - 1886013

PROGRAM-SPECIFIC			0	0.00	0	0.00	0	0.00	3,224,870	0.00	0	0.00	0	0.00
GENERAL REVENUE			0	0.00	0	0.00	0	0.00	3,224,870	0.00	0	0.00	0	0.00
TOTAL			\$0	0.00	\$0	0.00	\$0	0.00	\$3,224,870	0.00	\$0	0.00	\$0	0.00

The June to December 18 clawback rates are based on the most recent CY 18 CMS estimate. The January to May 19 rates assume an increase of 3.55%. This NDI assumes a caseload increase of 1.15% in FY 18 and .86% in FY 19.

TOTAL - PHARMACY-MED PART D-CLAWBAC			\$211,018,979	0.00	\$211,018,979	0.00	\$228,376,331	0.00	\$229,975,603	0.00	\$226,750,733	0.00	\$226,750,733	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.436**      **MO HealthNet Division – Missouri RX Plan**

Book 5, Page 256

This section provides funding for the MO RX Plan under the MMA Medicare Part D Prescription Drug plan. Part D of the Federal Medicare Prescription Drug Act requires states to pay Medicare a portion of the cost of Part D drugs attributable to what would have been paid for by the State absent the Part D drug benefit. Beginning January 1, 2006, the state is required to pay Medicare 90% of an average per person drug cost for each of the state's full-benefit dual eligibles for each month.

**Legal Basis:** Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003.

**Funding Sources:** General Revenue, Missouri Rx Plan and Health Families Trust Fund

**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$191,913) GR PSD core reduction due to anticipated lapse

**HOUSE:**

Same as Governor – no additional core changes. Created new section for program 11.436

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.436												
MISSOURI RX PLAN - 90538C												
CORE												
PROGRAM-SPECIFIC	24,986,247	0.00	22,883,096	0.00	11,562,803	0.00	11,562,803	0.00	11,370,890	0.00	11,370,890	0.00
GENERAL REVENUE	18,602,844	0.00	16,499,693	0.00	6,907,477	0.00	6,907,477	0.00	6,715,564	0.00	6,715,564	0.00
FEDERAL FUNDS	728,077	0.00	728,077	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	5,655,326	0.00	5,655,326	0.00	4,655,326	0.00	4,655,326	0.00	4,655,326	0.00	4,655,326	0.00
TOTAL	\$24,986,247	0.00	\$22,883,096	0.00	\$11,562,803	0.00	\$11,562,803	0.00	\$11,370,890	0.00	\$11,370,890	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	66,662	0.00	27,639	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	66,662	0.00	27,639	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$66,662	0.00	\$27,639	0.00	\$0	0.00	

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	25,120	0.00	17,583	0.00	0	0.00	
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Committee Markup Annual	FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.436												
MISSOURI RX PLAN - 90538C												
Year 2 Asset Limit Increase - 0000017												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	25,120	0.00	17,583	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	25,120	0.00	17,583	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$25,120	0.00	\$17,583	0.00	\$0	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.												
TOTAL - MISSOURI RX PLAN	\$24,986,247	0.00	\$22,883,096	0.00	\$11,562,803	0.00	\$11,654,585	0.00	\$11,416,112	0.00	\$11,370,890	0.00





DEPARTMENT OF SOCIAL SERVICES

**Section 11.440**      **MO HealthNet Division – Pharmacy Federal Reimbursement Allowance Payments**

Book 5, Page 266

This section provides funding for Pharmacy Reimbursement Allowance payments as provided by law.

**Legal Base:** RSMo 338.500; Federal – Social Security Act Section Number 1903 (w), 42 CFR 443 Subpart B.

**Funding Sources:** Pharmacy Federal Reimbursement Allowance (PFRA)

**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**

Committee Markup Annual	FY2019 DEPARTMENT OF SOCIAL SERVICES												Regular House Bills
	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.440													
PHARMACY FRA - 90542C													
CORE													
PROGRAM-SPECIFIC	108,308,926	0.00	100,602,330	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	
OTHER FUNDS	108,308,926	0.00	100,602,330	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	108,308,926	0.00	
TOTAL	\$108,308,926	0.00	\$100,602,330	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	\$108,308,926	0.00	

DEPARTMENT OF SOCIAL SERVICES

**Section 11.445 & 11.450**      **MO HealthNet Division – Pharmacy Provider Tax Transfers**

Book 6, Pages 598 & 599

These sections provide the mechanism to transfer funding between General Revenue and the Pharmacy Federal Reimbursement Allowance Fund for the pharmacy reimbursement program.

**Funding Sources:**      General Revenue and Pharmacy Federal Reimbursement Allowance (PFRA)

**FY 2018 GR W/H:**      \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.445												
GR PHARMACY FRA TRANSFER - 90535C												
CORE												
FUND TRANSFERS	38,737,111	0.00	35,463,699	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
GENERAL REVENUE	38,737,111	0.00	35,463,699	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
TOTAL	\$38,737,111	0.00	\$35,463,699	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00
TOTAL - GR PHARMACY FRA TRANSFER	\$38,737,111	0.00	\$35,463,699	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.450												
PHARMACY FRA TRANSFER - 90537C												
CORE												
FUND TRANSFERS	38,737,111	0.00	35,463,699	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
OTHER FUNDS	38,737,111	0.00	35,463,699	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
TOTAL	\$38,737,111	0.00	\$35,463,699	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00

TOTAL - PHARMACY FRA TRANSFER	\$38,737,111	0.00	\$35,463,699	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00
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## DEPARTMENT OF SOCIAL SERVICES

### Section 11.455      MO HealthNet Division – Physician's Services

Book 5, Page 274

This section provides funding for all non-institutional physician-related services provided to eligible Title XIX recipients. Covered services include office, hospital and nursing home visits; obstetrical services; and typical medical procedures including surgeries, anesthesiology, pathology, laboratory and radiology.

**Legal Base:** RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1905(a) (2), (3), (5), (6), (9), (17), (21), 1905(r), 1915(d), 42 CFR 440.210, 440.500, 412.113(c), and 441-Subpart B  
**Funding Sources:** General Revenue, Federal, Health Initiatives (HIF), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund  
**FY 2018 GR W/H:** \$1,696,725 (*as of March 29, 2018*)

#### CORE ADJUSTMENTS:

##### DEPARTMENT:

Core transfer in: \$1,250,000 (GR \$500,000 PSD & FED \$750,000 PSD) transferred in from HB 10 Mental Health – Trauma Treatment for Kids  
Core reallocation in: \$84,289,324 (GR \$15,802,161 PSD & FED \$68,487,163 PSD) reallocated in from the Managed Care section to align budget with planned expenditures  
Core reallocation within: ±\$1 OTH PSD reallocated to EE within section to more closely align budget with planned expenditures

##### GOVERNOR:

Core reduction: (\$7,986,374) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
(\$1,696,725) GR PSD core reduction – equal to the provider rate increase added in FY 2018  
Core reallocation out: (\$12,142,704) (GR \$4,307,885 PSD & FED \$7,834,819 PSD) reallocated out to Managed Care section to align budget with planned expenditures

##### HOUSE:

Core restoration: \$1,696,725 GR PSD core restoration – equal to the provider rate increase added in FY 2018 – reverse Governor's core reduction listed above  
Core reallocation out: (\$1,167,150) (GR \$583,575 EE & FED \$583,575 EE) reallocated out to MHD Admin & IT sections for administrative functions of such program  
(\$1,250,000) (GR \$500,000 PSD & FED \$750,000 PSD) reallocated out to new section for Trauma Treatment of Kids  
Core reallocation within: ±\$2,453,588 (GR \$1,121,767; FED \$1,331,820; & \$1 OTH) EE reallocated to PSD within section to more closely align budget with planned expenditures

##### SENATE:

##### CONFERENCE:



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455												
PHYSICIAN RELATED PROF - 90544C												
CORE												
EXPENSE & EQUIPMENT	3,620,737	0.00	1,764,431	0.00	3,620,737	0.00	3,620,738	0.00	3,620,738	0.00	0	0.00
GENERAL REVENUE	1,705,342	0.00	1,367,984	0.00	1,705,342	0.00	1,705,342	0.00	1,705,342	0.00	0	0.00
FEDERAL FUNDS	1,915,395	0.00	267,697	0.00	1,915,395	0.00	1,915,395	0.00	1,915,395	0.00	0	0.00
OTHER FUNDS	0	0.00	128,750	0.00	0	0.00	1	0.00	1	0.00	0	0.00
PROGRAM-SPECIFIC	454,340,429	0.00	477,850,175	0.00	322,283,483	0.00	407,822,806	0.00	385,997,003	0.00	388,897,316	0.00
GENERAL REVENUE	135,637,591	0.00	144,298,326	0.00	96,841,601	0.00	113,143,762	0.00	99,152,778	0.00	101,471,270	0.00
FEDERAL FUNDS	303,439,880	0.00	318,419,391	0.00	211,937,878	0.00	281,175,041	0.00	273,340,222	0.00	273,922,042	0.00
OTHER FUNDS	15,262,958	0.00	15,132,458	0.00	13,504,004	0.00	13,504,003	0.00	13,504,003	0.00	13,504,004	0.00
TOTAL	\$457,961,166	0.00	\$479,614,606	0.00	\$325,904,220	0.00	\$411,443,544	0.00	\$389,617,741	0.00	\$388,897,316	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	4,978,478	0.00	2,064,160	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	1,639,987	0.00	662,025	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	3,199,170	0.00	1,345,894	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	139,321	0.00	56,241	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$4,978,478	0.00	\$2,064,160	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,875,962	0.00	1,313,118	0.00	0	0.00
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	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.455													
PHYSICIAN RELATED PROF - 90544C													
Year 2 Asset Limit Increase - 0000017													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,875,962	0.00	1,313,118	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	617,971	0.00	421,148	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,205,493	0.00	856,192	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	52,498	0.00	35,778	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,875,962	0.00	\$1,313,118	0.00	\$0	0.00	
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.													

MHD COST TO CONTINUE - 1886001													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	99,140,358	0.00	90,329,220	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	57,667,549	0.00	53,946,028	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	41,472,809	0.00	36,383,192	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$99,140,358	0.00	\$90,329,220	0.00	\$0	0.00	
Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.													

FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	7,986,374	0.00	7,986,374	0.00	

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.455												
PHYSICIAN RELATED PROF - 90544C												
FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	7,986,374	0.00	7,986,374	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	7,986,374	0.00	7,986,374	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$7,986,374	0.00	\$7,986,374	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

Health Home Expansion - 1886026													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,055,204	0.00	1,055,204	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	377,130	0.00	377,130	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	678,074	0.00	678,074	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,055,204	0.00	\$1,055,204	0.00	

Provides funding to expand the primary care health home program.

TOTAL - PHYSICIAN RELATED PROF	\$457,961,166	0.00	\$479,614,606	0.00	\$325,904,220	0.00	\$517,438,342	0.00	\$492,365,817	0.00	\$397,938,894	0.00	
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DEPARTMENT OF SOCIAL SERVICES

Section 11.455 cont. MO HealthNet Division – MO HealthNet Trauma Treatment for Kids

Book N/A

This section would provide funding for a project for primary care practices and clinics in both rural and urban settings with the goal of improved patient outcomes and increased provider compliance with clinic standards of care through a Health Home type program.

**Legal Base:**

**Funding Sources:** General Revenue and Federal

**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

New section recommended by the House

**GOVERNOR:**

New section recommended by the House

**HOUSE:**

New section recommended by the House

Core reallocation in: \$1,250,000 (GR \$500,000 PSD & FED \$750,000 PSD) reallocated in from Physician Services section

**SENATE:**

**CONFERENCE:**

## Committee Markup Annual

**FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

[illegible]

DEPARTMENT OF SOCIAL SERVICES

**Section 11.455 cont. MO HealthNet Division – MO HealthNet Pilot Program for Neonatal Abstinence Syndrome**

Book 5, Page 274

This section would provide funding for a pilot program that focuses on providing clinical and case management support for pregnant women who are opioid addicted or display key risk factors which indicate a likelihood for addiction

**Legal Base:**

**Funding Sources:** General Revenue and Federal

**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$13,192) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

**HOUSE:**

Same as Governor – no additional core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.455													
NEONATAL ABSTINENCE SYNDROME - 90842C													
CORE													
PROGRAM-SPECIFIC	0	0.00	0	0.00	1,398,993	0.00	1,398,993	0.00	1,385,801	0.00	1,385,801	0.00	
GENERAL REVENUE	0	0.00	0	0.00	500,000	0.00	500,000	0.00	486,808	0.00	486,808	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	898,993	0.00	898,993	0.00	898,993	0.00	898,993	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$1,398,993	0.00	\$1,398,993	0.00	\$1,385,801	0.00	\$1,385,801	0.00	

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	13,192	0.00	13,192	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	13,192	0.00	13,192	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$13,192	0.00	\$13,192	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - NEONATAL ABSTINENCE SYNDROM	\$0	0.00	\$0	0.00	\$1,398,993	0.00	\$1,398,993	0.00	\$1,398,993	0.00	\$1,398,993	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.460**      **MO HealthNet Divisions – Dental Services**

Book 5, Page 301

This section provides funding to reimburse dentists enrolled in the Missouri Medicaid program.

**Legal Base:** RSMo 208.152 and 208.166; Federal – Social Security Act Section Number: 1905(a) (10), 42 CFR 440.100  
**Fund Sources:** General Revenue, Federal, Health Initiatives (HIF), and Healthy Families Trust Fund – Health Care Account (HFTF)  
**FY 2018 GR W/H:** \$89,319 (*as of March 29, 2018*)

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reallocation in: \$1,085,903 (GR \$203,580 PSD & FED \$882,323 PSD) reallocated in from Managed Care section to align budget with planned expenditures

**GOVERNOR:**

Core reduction: (\$89,319) GR PSD core reduction – equal to the provider rate increase added in FY 2018  
(\$73,519) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
Core reallocation out: \$306,494 (GR \$18,254 PSD & FED \$288,240 PSD) reallocated in from Managed Care section to align budget with planned expenditures

**HOUSE:**

Core restoration: \$89,319 GR PSD core restoration – equal to the provider rate increase added in FY 2018 – reverse Governor’s core reduction listed above

**SENATE:**

**CONFERENCE:**



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.460													
DENTAL - 90546C													
CORE													
PROGRAM-SPECIFIC	16,311,517	0.00	14,995,471	0.00	3,921,462	0.00	5,007,365	0.00	5,151,021	0.00	5,240,340	0.00	
GENERAL REVENUE	4,346,912	0.00	4,346,832	0.00	478,690	0.00	682,270	0.00	537,686	0.00	627,005	0.00	
FEDERAL FUNDS	10,178,203	0.00	9,918,004	0.00	2,522,837	0.00	3,405,160	0.00	3,693,400	0.00	3,693,400	0.00	
OTHER FUNDS	1,786,402	0.00	730,635	0.00	919,935	0.00	919,935	0.00	919,935	0.00	919,935	0.00	
TOTAL	\$16,311,517	0.00	\$14,995,471	0.00	\$3,921,462	0.00	\$5,007,365	0.00	\$5,151,021	0.00	\$5,240,340	0.00	

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	57,572	0.00	23,870	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	20,576	0.00	8,306	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	36,996	0.00	15,564	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$57,572	0.00	\$23,870	0.00	\$0	0.00	

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	21,694	0.00	15,185	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	7,753	0.00	5,284	0.00	0	0.00	

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.460													
DENTAL - 90546C													
Year 2 Asset Limit Increase - 0000017													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	21,694	0.00	15,185	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	13,941	0.00	9,901	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$21,694	0.00	\$15,185	0.00	\$0	0.00	
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.													

MHD COST TO CONTINUE - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,277,230	0.00	1,270,215	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	643,104	0.00	785,876	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	634,126	0.00	484,339	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,277,230	0.00	\$1,270,215	0.00	\$0	0.00	

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	73,519	0.00	73,519	0.00	
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	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.460													
DENTAL - 90546C													
FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	73,519	0.00	73,519	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	73,519	0.00	73,519	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$73,519	0.00	\$73,519	0.00	
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.													

TOTAL - DENTAL	\$16,311,517	0.00	\$14,995,471	0.00	\$3,921,462	0.00	\$6,363,861	0.00	\$6,533,810	0.00	\$5,313,859	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.465**      **MO HealthNet Division – Medicare and Other Health Insurance Premiums**

Book 5, Page 314

This section provides funding for Medicare Part A (hospital) and Part B (medical) premiums as well as group health insurance premiums when it is more cost effective to do so rather than pay for an equivalent set of services with state funds (Medicaid).

**Legal Base:** RSMo 208.153; Federal – Social Security Act Section Number: 1905(p) (1), 1902(a) (10), 1906, 42 CFR 406.26 and 431.625  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$6,237,622) FED PSD core reduction due to anticipated lapse  
(\$4,338,014) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

**HOUSE:**

Same as Governor – no additional core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465												
PREMIUM PAYMENTS - 90547C												
CORE												
PROGRAM-SPECIFIC	241,445,231	0.00	232,135,128	0.00	261,214,246	0.00	261,214,246	0.00	250,638,610	0.00	250,638,610	0.00
GENERAL REVENUE	78,237,045	0.00	77,999,990	0.00	88,605,500	0.00	88,605,500	0.00	84,267,486	0.00	84,267,486	0.00
FEDERAL FUNDS	163,208,186	0.00	154,135,138	0.00	172,608,746	0.00	172,608,746	0.00	166,371,124	0.00	166,371,124	0.00
TOTAL	\$241,445,231	0.00	\$232,135,128	0.00	\$261,214,246	0.00	\$261,214,246	0.00	\$250,638,610	0.00	\$250,638,610	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,442,272	0.00	1,012,607	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	872,868	0.00	352,357	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,569,404	0.00	660,250	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,442,272	0.00	\$1,012,607	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	920,283	0.00	644,171	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	328,909	0.00	224,152	0.00	0	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465												
PREMIUM PAYMENTS - 90547C												
Year 2 Asset Limit Increase - 0000017												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	920,283	0.00	644,171	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	591,374	0.00	420,019	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$920,283	0.00	\$644,171	0.00	\$0	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.												

MHD COST TO CONTINUE - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	6,277,073	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,980,393	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	2,296,680	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$6,277,073	0.00	\$0	0.00	\$0	0.00
Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.												

Medicare Premium Increase - 1886003

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	26,945,879	0.00	9,063,624	0.00	9,063,624	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	9,142,886	0.00	2,995,668	0.00	2,995,668	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.465												
PREMIUM PAYMENTS - 90547C												
Medicare Premium Increase - 1886003												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	26,945,879	0.00	9,063,624	0.00	9,063,624	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	17,802,993	0.00	6,067,956	0.00	6,067,956	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$26,945,879	0.00	\$9,063,624	0.00	\$9,063,624	0.00

Assuming \$9 Part A and no Part B increase from Jul-Aug actual. Part A increase estimated to be \$422 (from \$413) and Part B/QI estimated to remain at \$134.

FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	4,338,014	0.00	4,338,014	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	4,338,014	0.00	4,338,014	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$4,338,014	0.00	\$4,338,014	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - PREMIUM PAYMENTS	\$241,445,231	0.00	\$232,135,128	0.00	\$261,214,246	0.00	\$297,799,753	0.00	\$265,697,026	0.00	\$264,040,248	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.470**      **MO HealthNet Division – Nursing Facility Payments**

Book 6, Page 334

This section provides funding for the care of Medicaid patients in nursing facilities.

**Legal Base:** RSMo 208.152 and 208.153; Federal – Social Security Act Section Number: 1905(a) (4), 42 CFR 440.40 and 440.210  
**Funding Sources:** General Revenue, Federal, Uncompensated Care (UC), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reduction: (\$11,072,091) OTH PSD core reduction of the Senior Services Protection Fund due to veto of HCB 3  
Core reallocation within: ± \$10,750 (GR \$5,375 & FED \$5,375) PSD reallocated to EE within section to more closely align budget with planned expenditures

**GOVERNOR:**

Core reduction: (\$4,592,494) FED PSD core reduction due to anticipated lapse  
(\$3,355,947) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

**HOUSE:**

Core reallocation out: (\$1,010,750) (GR \$5,375 EE; GR \$500,000 PSD; FED \$5,375 EE; & FED \$500,000 PSD) reallocated out to MHD Admin & IT sections for administrative functions of such program

**SENATE:**

**CONFERENCE:**



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.470													
NURSING FACILITIES - 90549C													
CORE													
EXPENSE & EQUIPMENT	0	0.00	0	0.00	0	0.00	10,750	0.00	10,750	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	5,375	0.00	5,375	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	5,375	0.00	5,375	0.00	0	0.00	
PROGRAM-SPECIFIC	641,119,579	0.00	642,198,522	0.00	589,457,054	0.00	578,374,213	0.00	570,425,772	0.00	569,425,772	0.00	
GENERAL REVENUE	159,835,552	0.00	157,997,618	0.00	134,380,603	0.00	134,375,228	0.00	131,019,281	0.00	130,519,281	0.00	
FEDERAL FUNDS	405,610,154	0.00	404,500,653	0.00	378,476,928	0.00	378,471,553	0.00	373,879,059	0.00	373,379,059	0.00	
OTHER FUNDS	75,673,873	0.00	79,700,251	0.00	76,599,523	0.00	65,527,432	0.00	65,527,432	0.00	65,527,432	0.00	
TOTAL	\$641,119,579	0.00	\$642,198,522	0.00	\$589,457,054	0.00	\$578,384,963	0.00	\$570,436,522	0.00	\$569,425,772	0.00	

MHD COST TO CONTINUE - 1886001

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	7,072,488	0.00	4,816,334	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	7,072,488	0.00	4,816,334	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$7,072,488	0.00	\$4,816,334	0.00	\$0	0.00	

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	3,355,947	0.00	3,355,947	0.00	
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	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.470													
NURSING FACILITIES - 90549C													
FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	3,355,947	0.00	3,355,947	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	3,355,947	0.00	3,355,947	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$3,355,947	0.00	\$3,355,947	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

Nursing Homes Rate Restoration - 1886041													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,102,423	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,102,423	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$8,102,423	0.00	

Restoration of the 1.75% rate reduction caused by the veto of HCB3 in 2017.

TOTAL - NURSING FACILITIES	\$641,119,579	0.00	\$642,198,522	0.00	\$589,457,054	0.00	\$585,457,451	0.00	\$578,608,803	0.00	\$580,884,142	0.00	
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DEPARTMENT OF SOCIAL SERVICES

HB 11.470 cont.      MO HealthNet Division – Home Health

Book 6, Page 348

This section provides funding for Home Health Services and PACE. These programs help Medicaid recipients remain in their home instead of seeking institutional care.

**Legal Base:** RSMo 208.152 and 208.168; Federal – Social Security Act Section Number: 1905(a) (7), (24), 1915(c), 42 CFR 440.170(f), 440.210, 440.130 and 440.180  
**Fund Sources:** General Revenue, Federal, and Health Initiatives (HIF)  
**FY 2018 GR W/H:** \$32,288 (*as of March 29, 2018*)

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$1,754,051) (GR \$633,174 PSD & FED \$1,120,877 PSD) core reduction due to anticipated lapse

GOVERNOR:

Core reduction: (\$315,283) (GR \$111,289 PSD & FED \$203,994 PSD) core reduction due to anticipated lapse  
(\$90,341) (GR \$32,288 PSD & FED \$58,053 PSD) core reduction – equal to the provider rate increase added in FY 2018  
(\$42,008) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Core restoration: \$90,341 (GR \$32,288 PSD & FED \$58,053 PSD) core restoration – equal to the provider rate increase added in FY 2018 – reverse Governor’s core reduction listed above

SENATE:

CONFERENCE:

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.470												
HOME HEALTH - 90564C												
CORE												
PROGRAM-SPECIFIC	7,346,322	0.00	5,253,779	0.00	7,353,195	0.00	5,599,144	0.00	5,151,512	0.00	5,241,853	0.00
GENERAL REVENUE	2,552,515	0.00	1,771,073	0.00	2,469,633	0.00	1,836,459	0.00	1,650,874	0.00	1,683,162	0.00
FEDERAL FUNDS	4,634,502	0.00	3,328,180	0.00	4,724,257	0.00	3,603,380	0.00	3,341,333	0.00	3,399,386	0.00
OTHER FUNDS	159,305	0.00	154,526	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00
TOTAL	\$7,346,322	0.00	\$5,253,779	0.00	\$7,353,195	0.00	\$5,599,144	0.00	\$5,151,512	0.00	\$5,241,853	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	63,632	0.00	26,384	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	22,742	0.00	9,181	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	40,890	0.00	17,203	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$63,632	0.00	\$26,384	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	23,978	0.00	16,784	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	8,570	0.00	5,840	0.00	0	0.00

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.470													
HOME HEALTH - 90564C													
Year 2 Asset Limit Increase - 0000017													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	23,978	0.00	16,784	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	15,408	0.00	10,944	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$23,978	0.00	\$16,784	0.00	\$0	0.00	

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	42,008	0.00	42,008	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	42,008	0.00	42,008	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$42,008	0.00	\$42,008	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - HOME HEALTH	\$7,346,322	0.00	\$5,253,779	0.00	\$7,353,195	0.00	\$5,686,754	0.00	\$5,236,688	0.00	\$5,283,861	0.00	
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DEPARTMENT OF SOCIAL SERVICES

MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL) transfer to GR

Book N/A

This section establishes a partnership between privately owned long-term care facilities and publicly operated long-term care related services, such as county nursing homes, which allows Missouri to generate new federal revenue by having private nursing homes assume financial responsibility for publicly funded long-term care services and supports. This shift in financial responsibility frees up public funding that can be used to access additional federal matching funds. The new dollars can be used to offset general revenue, increase reimbursement to providers of long-term care and supports, as well as assist local governments to develop and maintain its long-term service delivery system.

**Legal Base:** Federal - 42 CFR 447.272

**Fund Sources:** Federal and Other

**FY 2018 GR W/H:** N/A

CORE ADJUSTMENTS:

Funding was cut in the FY 2018 Budget (2017 Session).



Committee Markup Annual			FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
FY 2017 BUDGET			FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED			
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.470														
LONG TERM SUPPORT UPL TRANSFER - 90545C														
CORE														
FUND TRANSFERS	10,990,982	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
OTHER FUNDS	10,990,982	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00		
TOTAL	\$10,990,982	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00		
TOTAL - LONG TERM SUPPORT UPL TRANSF	\$10,990,982	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00		

DEPARTMENT OF SOCIAL SERVICES

Section 11.475      MO HealthNet Division – Long-Term Care Upper Payment Limit (UPL)

Book 6, Page 357

This section establishes a partnership between privately owned long-term care facilities and publicly operated long-term care related services, such as county nursing homes, which allows Missouri to generate new federal revenue by having private nursing homes assume financial responsibility for publicly funded long-term care services and supports. This shift in financial responsibility frees up public funding that can be used to access additional federal matching funds. The new dollars can be used to offset general revenue, increase reimbursement to providers of long-term care and supports, as well as assist local governments to develop and maintain its long-term service delivery system.

**Legal Base:**            Federal - 42 CFR 447.272  
**Fund Sources:**        Federal and Other  
**FY 2018 GR W/H:**    N/A

CORE ADJUSTMENTS:

DEPARTMENT:  
No core changes

GOVERNOR:  
Core reduction:            (\$103,265) OTH PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:  
Same as Governor – no additional core changes

SENATE:

CONFERENCE:

Committee Markup Annual			FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills			
			FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED			
			DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.475																
LONG TERM SUPPORT PAYMENTS - 90548C																
CORE																
PROGRAM-SPECIFIC			10,950,768	0.00	5,372,533	0.00	10,950,768	0.00	10,950,768	0.00	10,847,503	0.00	10,847,503	0.00		
FEDERAL FUNDS			6,291,672	0.00	3,399,739	0.00	7,036,964	0.00	7,036,964	0.00	7,036,964	0.00	7,036,964	0.00		
OTHER FUNDS			4,659,096	0.00	1,972,794	0.00	3,913,804	0.00	3,913,804	0.00	3,810,539	0.00	3,810,539	0.00		
TOTAL			\$10,950,768	0.00	\$5,372,533	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,847,503	0.00	\$10,847,503	0.00		

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	0	0.00	103,265	0.00	103,265	0.00
FEDERAL FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	103,265	0.00	103,265	0.00
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$103,265	0.00	\$103,265	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - LONG TERM SUPPORT PAYMENTS		\$10,950,768	0.00	\$5,372,533	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00
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## DEPARTMENT OF SOCIAL SERVICES

### Section 11.480

### MO HealthNet Division – Rehabilitation and Specialty Services

Book 6, Page 366

This section provides funding for the reimbursement of all other allowable, non-institutional services as provided by title XIX of the Social Security Act. These services include rehabilitation, optometry, audiology, ambulance, durable medical equipment, hospice, comprehensive day rehabilitation, and diabetics' self-management training.

**Legal Base:** RSMo 208.152; Federal – Social Security Act Section Number: 1905(a) (15), (18), 1905(o), 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170  
**Funding Sources:** General Revenue, Federal, Health Initiatives (HIF), and Healthy Families Trust Fund – Health Care Account (HFTF)  
**FY 2018 GR W/H:** \$727,070 (*as of March 29, 2018*)

### CORE ADJUSTMENTS:

#### DEPARTMENT:

Core reallocation in: \$8,338,056 (GR \$1,563,179 PSD & FED \$6,774,877 PSD) reallocated in from Managed Care section to align budget with planned expenditures  
Core reallocation within: ±\$1 OTH PSD reallocated to EE within section to more closely align budget with planned expenditures

#### GOVERNOR:

Core reduction: (\$727,070) GR PSD core reduction – equal to the provider rate increase added in FY 2018  
(\$146,582) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
Core reallocation in: \$15,016,312 (GR \$2,157,599 PSD & FED \$12,858,713 PSD) reallocated in from Managed Care section to align budget with planned expenditures

#### HOUSE:

Core restoration: \$727,070 GR PSD core restoration – equal to the provider rate increase added in FY 2018 – reverse Governor's core reduction listed above  
Core reallocation out: (\$437,361) (GR \$218,680 EE & FED \$218,681 EE) reallocated out to MHD Admin & IT sections for administrative functions of such program  
Core reallocation within: ±\$1,688,335 (GR \$625,654; FED \$625,319 & OTH \$1) EE reallocated to PSD within section to more closely align budget with planned expenditures

#### SENATE:

#### CONFERENCE:

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480												
REHAB AND SPECIALTY SERVICES - 90550C												
CORE												
EXPENSE & EQUIPMENT	1,688,334	0.00	368,606	0.00	1,688,334	0.00	1,688,335	0.00	1,688,335	0.00	0	0.00
GENERAL REVENUE	844,334	0.00	59,016	0.00	844,334	0.00	844,334	0.00	844,334	0.00	0	0.00
FEDERAL FUNDS	844,000	0.00	59,590	0.00	844,000	0.00	844,000	0.00	844,000	0.00	0	0.00
OTHER FUNDS	0	0.00	250,000	0.00	0	0.00	1	0.00	1	0.00	0	0.00
PROGRAM-SPECIFIC	262,003,029	0.00	255,127,260	0.00	263,016,030	0.00	271,354,085	0.00	285,496,745	0.00	287,474,789	0.00
GENERAL REVENUE	78,836,270	0.00	79,599,174	0.00	81,738,266	0.00	83,301,445	0.00	84,585,392	0.00	85,938,116	0.00
FEDERAL FUNDS	155,017,106	0.00	151,959,483	0.00	154,656,913	0.00	161,431,790	0.00	174,290,503	0.00	174,915,822	0.00
OTHER FUNDS	28,149,653	0.00	23,568,603	0.00	26,620,851	0.00	26,620,850	0.00	26,620,850	0.00	26,620,851	0.00
TOTAL	\$263,691,363	0.00	\$255,495,866	0.00	\$264,704,364	0.00	\$273,042,420	0.00	\$287,185,080	0.00	\$287,474,789	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,208,954	0.00	915,869	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	612,162	0.00	247,116	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,419,474	0.00	597,174	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	177,318	0.00	71,579	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,208,954	0.00	\$915,869	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	832,366	0.00	582,631	0.00	0	0.00
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	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.480													
REHAB AND SPECIALTY SERVICES - 90550C													
Year 2 Asset Limit Increase - 0000017													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	832,366	0.00	582,631	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	230,672	0.00	157,203	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	534,878	0.00	379,893	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	66,816	0.00	45,535	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$832,366	0.00	\$582,631	0.00	\$0	0.00	

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

MHD COST TO CONTINUE - 1886001													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	9,807,148	0.00	18,838,090	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	6,056,600	0.00	10,231,309	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	3,750,548	0.00	8,606,781	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$9,807,148	0.00	\$18,838,090	0.00	\$0	0.00	

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

Hospice Rate Increase - 1886010													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	297,746	0.00	271,554	0.00	271,554	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	105,373	0.00	94,493	0.00	94,493	0.00	

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480												
REHAB AND SPECIALTY SERVICES - 90550C												
Hospice Rate Increase - 1886010												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	297,746	0.00	271,554	0.00	271,554	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	192,373	0.00	177,061	0.00	177,061	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$297,746	0.00	\$271,554	0.00	\$271,554	0.00
Federal law requires that Medicaid hospice rates be adjusted when Medicare hospice rates are adjusted, on an annual basis. The rate paid for any day may vary depending on the level of care furnished. This request funds a 2.5% increase.												

FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	146,582	0.00	146,582	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	146,582	0.00	146,582	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$146,582	0.00	\$146,582	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.												

TOTAL - REHAB AND SPECIALTY SERVICES	\$263,691,363	0.00	\$255,495,866	0.00	\$264,704,364	0.00	\$286,188,634	0.00	\$307,939,806	0.00	\$287,892,925	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.480 cont. MO HealthNet Division – Community Health Access Programs

Book 6, Page 405

New section created by the House that provides state matching funds (50/50 State/Local Match) for Community Health Access Programs (CHAPs) focused on meeting the health care needs of their communities and reducing the costs incurred by health care providers when patients inappropriately access health care resources through Emergency Medical Services (EMS) or Emergency Departments (ED). This program will be managed by providers that either operate their own EMS or partner with a local ambulance district(s). Target population is ages 17-64 that, after receiving a full medical screening exam, are deemed to have a non-emergency medical condition that can be more appropriately treated by a primary care provider in a health care home or community resource center.

**Legal Base:**

**Funding Sources:** General Revenue

**FY 2018 GR W/H:** \$500,000 (*as of March 29, 2018*)

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$1,398,993) (GR \$500,000 PSD & FED \$898,993 PSD) core reduction – current FY 2018 withhold

**HOUSE:**

Core restoration: \$1,385,843 (GR \$486,850 PSD & FED \$898,993 PSD) core restoration – reverse Governor’s core reduction listed above

**SENATE:**

**CONFERENCE:**



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480												
COMMUNITY HEALTH ACCESS PRGRMS - 90579C												
CORE												
PROGRAM-SPECIFIC	1,631,676	0.00	0	0.00	1,398,993	0.00	1,398,993	0.00	0	0.00	1,385,843	0.00
GENERAL REVENUE	600,000	0.00	0	0.00	500,000	0.00	500,000	0.00	0	0.00	486,850	0.00
FEDERAL FUNDS	1,031,676	0.00	0	0.00	898,993	0.00	898,993	0.00	0	0.00	898,993	0.00
TOTAL	\$1,631,676	0.00	\$0	0.00	\$1,398,993	0.00	\$1,398,993	0.00	\$0	0.00	\$1,385,843	0.00

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	13,150	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	13,150	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$13,150	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - COMMUNITY HEALTH ACCESS PRGI	\$1,631,676	0.00	\$0	0.00	\$1,398,993	0.00	\$1,398,993	0.00	\$0	0.00	\$1,398,993	0.00
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DEPARTMENT OF SOCIAL SERVICES

Section 11.480 cont. MO HealthNet Division – Non-Emergency Medical Transportation (NEMT)

Book 6, Page 388

This section provides funding for Non-Emergency Medical Transportation (NEMT).

**Legal Base:** RSMo 208.152; Federal – 42 CFR 431.53  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core transfer in: \$1,228,617 (GR \$454,984 PSD & FED \$773,633 PSD) core transfer in from HB 10 Mental Health

GOVERNOR:

Core reduction: (\$2,950,547) FED PSD core reduction due to anticipated lapse  
(\$379,448) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

HOUSE:

Same as Governor – no additional core changes

SENATE:

CONFERENCE:

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480												
NON-EMERGENCY TRANSPORT - 90561C												
CORE												
PROGRAM-SPECIFIC	46,604,497	0.00	40,872,346	0.00	47,032,706	0.00	48,261,323	0.00	44,931,328	0.00	44,931,328	0.00
GENERAL REVENUE	15,626,583	0.00	13,853,534	0.00	13,297,060	0.00	13,752,044	0.00	13,372,596	0.00	13,372,596	0.00
FEDERAL FUNDS	30,977,914	0.00	27,018,812	0.00	33,735,646	0.00	34,509,279	0.00	31,558,732	0.00	31,558,732	0.00
TOTAL	\$46,604,497	0.00	\$40,872,346	0.00	\$47,032,706	0.00	\$48,261,323	0.00	\$44,931,328	0.00	\$44,931,328	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	439,367	0.00	182,168	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	157,030	0.00	63,389	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	282,337	0.00	118,779	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$439,367	0.00	\$182,168	0.00	\$0	0.00	

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	165,560	0.00	115,887	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	59,171	0.00	40,325	0.00	0	0.00	

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.480												
NON-EMERGENCY TRANSPORT - 90561C												
Year 2 Asset Limit Increase - 0000017												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	165,560	0.00	115,887	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	106,389	0.00	75,562	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$165,560	0.00	\$115,887	0.00	\$0	0.00
Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.												

MHD COST TO CONTINUE - 1886001												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	316,687	0.00	224,336	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	316,687	0.00	224,336	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$316,687	0.00	\$224,336	0.00	\$0	0.00
Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.												

NEMT Increase - 1886004												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,209,072	0.00	2,209,072	0.00	2,209,072	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	789,522	0.00	768,691	0.00	768,691	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.480													
NON-EMERGENCY TRANSPORT - 90561C													
NEMT Increase - 1886004													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	2,209,072	0.00	2,209,072	0.00	2,209,072	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,419,550	0.00	1,440,381	0.00	1,440,381	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$2,209,072	0.00	\$2,209,072	0.00	\$2,209,072	0.00	

This is a 3.2% actuarial increase to FY18 rates related to increases in utilization and cost components. This includes an increase to DMH service rates based on utilization, which are being transferred to MHD in FY19.

FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	379,448	0.00	379,448	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	379,448	0.00	379,448	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$379,448	0.00	\$379,448	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - NON-EMERGENCY TRANSPORT	\$46,604,497	0.00	\$40,872,346	0.00	\$47,032,706	0.00	\$51,392,009	0.00	\$48,042,239	0.00	\$47,519,848	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.485**      **MO HealthNet Division – Ground Emergency Medical Transportation**

Book 6, Page 412

This new section provides funding for payments to providers of ground emergency medical transportation. Senate Bill 607 (2016) created two new sections in Chapter 208, RSMo, which authorize the MO HealthNet Division to implement and administer supplemental payments to providers of ground emergency medical transportation (GEMT) for allowable medical expenditures.

**Legal Base:** RSMo 208.1030  
**Funding Sources:** Federal and Ground Emergency Medical Transportation Fund  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$1,660,086) OTH PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

**HOUSE:**

Same as Governor – no additional core changes

**SENATE:**

**CONFERENCE:**

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.485												
GROUND EMER MED TRANSPORT - 90588C												
CORE												
PROGRAM-SPECIFIC	0	0.00	0	0.00	83,960,246	0.00	83,960,246	0.00	82,300,160	0.00	82,300,160	0.00
FEDERAL FUNDS	0	0.00	0	0.00	53,084,513	0.00	53,084,513	0.00	53,084,513	0.00	53,084,513	0.00
OTHER FUNDS	0	0.00	0	0.00	30,875,733	0.00	30,875,733	0.00	29,215,647	0.00	29,215,647	0.00
TOTAL	\$0	0.00	\$0	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$82,300,160	0.00	\$82,300,160	0.00

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,660,086	0.00	1,660,086	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,660,086	0.00	1,660,086	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,660,086	0.00	\$1,660,086	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - GROUND EMER MED TRANSPORT	\$0	0.00	\$0	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.490**      **MO HealthNet Division – Complex Rehabilitation Technology Products**

Book 6, Page 420

New section created by the House that provides funding for complex rehabilitation technology (CRT) items classified within the Medicare program as of January 1, 2014 as durable medical equipment that are individually configured for individuals to meet their specific and unique medical, physical, and functional needs and capacities for basic activities of daily living and instrumental activities of daily living identified as medically necessary to prevent hospitalization and/or institutionalization of a complex needs patient. Such items shall include, but not be limited to, complex rehabilitation power wheelchairs, highly configurable manual wheelchairs, adaptive seating and positioning systems, and other specialized equipment such as standing frames and gait trainers. The related Healthcare Common Procedure Coding System (HCPCS) billing codes include, but are not limited to pure complex rehabilitation technology codes and mixed complex rehabilitation technology codes which contain a mix of complex rehabilitation technology products and standard mobility and accessory products. This section provides funding for HCPCS codes defined by the National Coalition for Assistive and Rehab Technology (NCART) as CRT to MO HealthNet allowables as of 04/01/2010. HCPCS codes adopted after 04/01/2010 shall be reimbursed at the current Medicare allowable. Manually priced items shall be reimbursed at ninety percent (90%) of the Manufacturer's Suggested Retail Price (MSRP) for manual priced manual and custom wheelchairs and accessories and ninety five (95%) of MSRP on manually priced power mobility devices and accessories

**Legal Base:** RSMo 208.152; Federal – Social Security Act Section Number: 1905(a) (15), (18), 1905(o), 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** \$58,033 *(as of March 29, 2018)*

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reallocation in: \$93,614 (GR \$17,550 PSD & FED \$76,064 PSD) reallocated in from Managed Care section to align budget with planned expenditures

**GOVERNOR:**

Core reduction: (\$441,069) (GR \$155,120 PSD & FED \$285,949 PSD) core reduction due to anticipated lapse  
(\$162,374) (GR \$58,032 PSD & FED \$104,342 PSD) core reduction – equal to the provider rate increase added in FY 2018  
(\$108,358) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
Core reallocation out: (\$93,614) (GR \$17,550 PSD & FED \$76,064 PSD) reallocated out to Managed Care section to align budget with planned expenditures

**HOUSE:**

Core restoration: \$162,374 (GR \$58,032 PSD & FED \$104,342 PSD) core restoration – equal to the provider rate increase added in FY 2018 – reverse Governor's core reduction listed above

**SENATE:**

**CONFERENCE:**



Committee Markup Annual			FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills			
			FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED			
			DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.490																
COMPLEX REHAB TECHN LGY PRDUCTS - 90577C																
CORE																
PROGRAM-SPECIFIC			11,666,969	0.00	10,056,491	0.00	11,654,537	0.00	11,748,151	0.00	10,942,736	0.00	11,105,110	0.00		
GENERAL REVENUE			4,178,400	0.00	3,698,202	0.00	4,166,960	0.00	4,184,510	0.00	3,845,450	0.00	3,903,482	0.00		
FEDERAL FUNDS			7,488,569	0.00	6,358,289	0.00	7,487,577	0.00	7,563,641	0.00	7,097,286	0.00	7,201,628	0.00		
TOTAL			\$11,666,969	0.00	\$10,056,491	0.00	\$11,654,537	0.00	\$11,748,151	0.00	\$10,942,736	0.00	\$11,105,110	0.00		

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	106,054	0.00	43,972	0.00	0	0.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	37,904	0.00	15,301	0.00	0	0.00
FEDERAL FUNDS		0	0.00	0	0.00	0	0.00	68,150	0.00	28,671	0.00	0	0.00
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$106,054	0.00	\$43,972	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	39,963	0.00	27,973	0.00	0	0.00
GENERAL REVENUE		0	0.00	0	0.00	0	0.00	14,283	0.00	9,734	0.00	0	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490												
COMPLEX REHAB TECHN LGY PRDUCTS - 90577C												
Year 2 Asset Limit Increase - 0000017												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	39,963	0.00	27,973	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	25,680	0.00	18,239	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$39,963	0.00	\$27,973	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

MHD COST TO CONTINUE - 1886001												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	110,109	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	54,415	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	55,694	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$110,109	0.00	\$0	0.00	\$0	0.00

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	108,358	0.00	108,358	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.490												
COMPLEX REHAB TECHNLOGY PRDUCTS - 90577C												
FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	108,358	0.00	108,358	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	108,358	0.00	108,358	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$108,358	0.00	\$108,358	0.00

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

TOTAL - COMPLEX REHAB TECHNLOGY PRDU	\$11,666,969	0.00	\$10,056,491	0.00	\$11,654,537	0.00	\$12,004,277	0.00	\$11,123,039	0.00	\$11,213,468	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.495 & 11.500 MO HealthNet Division – Ground Ambulance Provider Tax Transfers**

Book 6, Pages 596 & 597

These two sections provide the mechanism to transfer funding between General Revenue and the Ambulance Service Reimbursement Allowance Fund for Ambulance Services in the MO HealthNet program.

**Legal Basis:** RSMo. 190.800-190.839  
**Funding Sources:** General Revenue and Ambulance Service Reimbursement Allowance Fund  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**  
No core changes

**GOVERNOR:**  
No core changes

**HOUSE:**  
No core changes

**SENATE:**

**CONFERENCE:**

## Committee Markup Annual

**FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.495												
AMBULANCE SRV REIM ALLOW TRF - 90581C												
CORE												
FUND TRANSFERS	19,522,756	0.00	7,671,671	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
GENERAL REVENUE	19,522,756	0.00	7,671,671	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
TOTAL	\$19,522,756	0.00	\$7,671,671	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00

TOTAL - AMBULANCE SRV REIM ALLOW TRF	\$19,522,756	0.00	\$7,671,671	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00
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## Committee Markup Annual

**FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.500												
GR AMBULANCE SRV REIM ALL TRF - 90583C												
CORE												
FUND TRANSFERS	19,522,756	0.00	7,671,671	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
OTHER FUNDS	19,522,756	0.00	7,671,671	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
TOTAL	\$19,522,756	0.00	\$7,671,671	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00

TOTAL - GRAMBULANCE SRV REIM ALL TRF	\$19,522,756	0.00	\$7,671,671	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.505      MO HealthNet Division – Managed Care**

Book 6, Page 432

The Division of Medical Services (DMS) operates an HMO-style managed care program, Managed Care Plus (MC+). Health plans contract with the state and are paid a monthly capitation payment for providing services for each enrollee. Participation in MC+ is mandatory for certain Medicaid eligibility groups within the regions in operation. There are three eligibility groups: (1) TANF Adults and Children, Refugees, Medicaid for Children, and 1115 Waiver Children; (2) Medicaid for Pregnant Women and 1115 Waiver Adults; and (3) children in state care and custody. Those recipients who also receive SSI disability payments have the option of choosing to receive services on a fee-for-service basis.

**Legal Base:** RSMo 208.166; Federal – Social Security Act Section Number: 1915(b), 42 CFR 434 Subpart C  
**Funding Sources:** General Revenue, Federal, Health Initiatives (HIF), Federal Reimbursement Allowance (FRA), Healthy Families Trust Fund – Health Care Account (HFTF), and Medicaid managed Care Organization Reimbursement Allowance Fund  
**FY 2018 GR W/H:** \$33,817,448 (*as of March 29, 2018*)

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reduction: (\$40,523,240) (GR \$14,400,957 PSD & FED \$26,122,283 PSD) core reduction of one-time costs for statewide Managed Care transition  
(\$44,862,793) (FED \$10,000,000 PSD & OTH \$34,862,793 PSD) core reduction of one-time Other Funds  
(\$53,546,430) OTH PSD core reduction of FRA Funds  
Core reallocation out: (\$209,190,767) (GR \$39,218,088 PSD & FED \$169,972,679) PSD reallocated out to other Medicaid sections  
Core reallocation within: ± \$2,100,002 (GR \$1,050,000; FED \$1,050,000; & OTH \$2) PSD reallocated to EE within in section to more closely align budget with planned expenditures

**GOVERNOR:**

Core reduction: (\$40,233,354) (GR \$7,000,000 PSD; FED \$13,116,677 PSD; & OTH \$20,116,677 PSD) core reduction from cost containment initiatives  
(\$23,393,776) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
(\$3,669,983) OTH PSD core reduction of FRA Funds  
Core reallocation out: (\$8,473,307) FED PSD reallocated out to other Medicaid sections  
Core reallocation in: \$5,400,641 GR PSD core reallocated in from other Medicaid sections

**HOUSE:**

Core reduction: (\$81,200,000) GR PSD core reduction – fund switch to FED Funds – Enhanced FMAP funds  
Core reallocation out: (\$11,600,000) (GR \$1,050,000 EE; GR \$8,250,000 PSD; FED \$1,050,000 EE; & FED \$1,250,000 PSD) reallocated out to MHD Admin & IT sections for administrative functions of such program  
Core restoration: \$20,116,677 OTH PSD core restoration  
Core reallocation within: ± \$2 OTH EE reallocated to PSD within in section to more closely align budget with planned expenditures

**SENATE:**

**CONFERENCE:**



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505 MANAGED CARE - 90551C												
CORE												
EXPENSE & EQUIPMENT	0	0.00	3,411,196	0.00	0	0.00	2,100,002	0.00	2,100,002	0.00	0	0.00
GENERAL REVENUE	0	0.00	1,581,095	0.00	0	0.00	1,050,000	0.00	1,050,000	0.00	0	0.00
FEDERAL FUNDS	0	0.00	1,672,948	0.00	0	0.00	1,050,000	0.00	1,050,000	0.00	0	0.00
OTHER FUNDS	0	0.00	157,153	0.00	0	0.00	2	0.00	2	0.00	0	0.00
PROGRAM-SPECIFIC	1,888,226,425	0.00	1,871,059,533	0.00	2,264,099,294	0.00	1,913,876,062	0.00	1,843,506,283	0.00	1,772,922,962	0.00
GENERAL REVENUE	467,559,953	0.00	470,554,412	0.00	458,560,957	0.00	403,891,912	0.00	378,898,777	0.00	289,448,777	0.00
FEDERAL FUNDS	1,235,543,176	0.00	1,214,275,732	0.00	1,464,071,911	0.00	1,256,926,949	0.00	1,235,336,965	0.00	1,234,086,965	0.00
OTHER FUNDS	185,123,296	0.00	186,229,389	0.00	341,466,426	0.00	253,057,201	0.00	229,270,541	0.00	249,387,220	0.00
TOTAL	\$1,888,226,425	0.00	\$1,874,470,729	0.00	\$2,264,099,294	0.00	\$1,915,976,064	0.00	\$1,845,606,285	0.00	\$1,772,922,962	0.00

MO HEALTHNET GR PICKUP - 1886018

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	44,862,793	0.00	44,862,793	0.00	44,862,793	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	44,862,793	0.00	44,862,793	0.00	44,862,793	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$44,862,793	0.00	\$44,862,793	0.00	\$44,862,793	0.00

Funding is required to backfill one-time funds budgeted in FY18. One-time cash sources include enhanced Children's Health Insurance Premium (CHIP) federal match, Healthy Families Trust Fund, Life Sciences Research Trust Fund, and Premium Fund. There are corresponding core reductions associated with this GR pickup.

Mngd Care Actuarial Rate Inc - 1886007

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	36,217,649	0.00	35,579,257	0.00	35,579,257	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	12,944,188	0.00	12,380,514	0.00	12,380,514	0.00

Committee Markup Annual	FY2019 DEPARTMENT OF SOCIAL SERVICES												Regular House Bills
	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.505													
MANAGED CARE - 90551C													
Mngd Care Actuarial Rate Inc - 1886007													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	36,217,649	0.00	35,579,257	0.00	35,579,257	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	23,273,461	0.00	23,198,743	0.00	23,198,743	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$36,217,649	0.00	\$35,579,257	0.00	\$35,579,257	0.00	
Federal rule requires payments made on behalf of managed care participants be actuarially sound. This is a 1.9% actuarial increase to FY19 rates related to increases in utilization and cost components.													

Managed Care Hlth Insurer Fee - 1886008													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	60,712,439	0.00	60,712,439	0.00	60,712,439	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	21,698,626	0.00	21,698,626	0.00	21,698,626	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	39,013,813	0.00	39,013,813	0.00	39,013,813	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$60,712,439	0.00	\$60,712,439	0.00	\$60,712,439	0.00	
This is an increase to FY19 Managed Care expenditures related to Federally Mandated Health Insurer Fee (HIF). This assumes no moratorium on the CY19 fees. HIF moratorium is currently through CY17.													

Managed Care Withhold Release - 1886009													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	34,761,130	0.00	33,034,628	0.00	33,034,628	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	12,423,628	0.00	11,495,060	0.00	11,495,060	0.00	

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505												
MANAGED CARE - 90551C												
Managed Care Withhold Release - 1886009												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	34,761,130	0.00	33,034,628	0.00	33,034,628	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	22,337,502	0.00	21,539,568	0.00	21,539,568	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$34,761,130	0.00	\$33,034,628	0.00	\$33,034,628	0.00
This assumes all withholds will be 100% released. Health Plan withhold releases deferred from FY17/FY18 rate year. This is expected releases over the prior year due to moving from a 2.5% withhold to a 5% withhold and also increased withhold on Statewide enrollment. This was included as an FY18 offset to MC transition costs in FY18 Gov Rec.												

FMAP Adjustment - 1886022												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	23,393,776	0.00	23,393,776	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	23,393,776	0.00	23,393,776	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$23,393,776	0.00	\$23,393,776	0.00
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.												

Medicare Parity Maternal CTC - 1886027												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	4,196,978	0.00	4,196,978	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	1,460,422	0.00	1,460,422	0.00

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.505												
MANAGED CARE - 90551C												
Medicare Parity Maternal CTC - 1886027												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	4,196,978	0.00	4,196,978	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	2,736,556	0.00	2,736,556	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$4,196,978	0.00	\$4,196,978	0.00
Corresponding to FY18 supplemental providing Medicare parity payments for primary care physicians relating to maternal-fetal medicine, neonatology and pediatric cardiology.												

Extended Postpartum Care - SUD - 1886037												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	4,636,802	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	1,534,697	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,875,732	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	226,373	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$4,636,802	0.00

This decision item provides funding for DSS to seek either a state plan amendment or waiver to extend Medicaid coverage for postpartum care to 1 year (from 2 months currently) for women with substance use disorder who don't otherwise qualify for Medicaid for that period of time. Program enrollment shall be capped so that expenditures do not exceed the amount appropriated.

MC Supplemental Payments - 1886038												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	24,390,604	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	15,417,301	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.505													
MANAGED CARE - 90551C													
MC Supplemental Payments - 1886038													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	24,390,604	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	8,973,303	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$24,390,604	0.00	
This decision item provides federal and IGT funding for supplemental payments, as approved by CMS, to physicians and other healthcare professionals at Tier 1 Safety Net Hospitals.													

CHIP Fund Switch - 1886043													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	81,200,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	81,200,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$81,200,000	0.00	
This item represents the amount of increased enhanced CHIP funding the state will receive in FY18 and FY19 that was not budgeted for in the FY18 budget or FY19 Governor's recommendation. A like amount has been reduced from the Managed Care GR appropriation to complete the fund switch.													

TOTAL - MANAGED CARE	\$1,888,226,425	0.00	\$1,874,470,729	0.00	\$2,264,099,294	0.00	\$2,092,530,075	0.00	\$2,047,386,156	0.00	\$2,084,930,239	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**MO HealthNet Division – Fee-For-Services run-out claims**

Book N/A

This section includes transitional funding for the remaining Fee-For-Services run-out claims from FY17 which will be paid in FY18 as the state transitions to statewide Managed Care statewide those population groups currently in Managed Care. The Division of Medical Services (DMS) operates an HMO-style managed care program, Managed Care Plus (MC+). Health plans contract with the state and are paid a monthly capitation payment for providing services for each enrollee. Participation in MC+ is mandatory for certain Medicaid eligibility groups within the regions in operation. There are three eligibility groups: (1) TANF Adults and Children, Refugees, Medicaid for Children, and 1115 Waiver Children; (2) Medicaid for Pregnant Women and 1115 Waiver Adults; and (3) children in state care and custody.

**Legal Base:** RSMo 208.166; Federal – Social Security Act Section Number: 1915(b), 42 CFR 434 Subpart C  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reduction: (\$58,313,932) (GR \$20,723,329 PSD & FED \$37,590,603 PSD) core reduction of one-time expenditures

**GOVERNOR:**

Same as Department – no additional core changes

**HOUSE:**

Same as Department – no additional core changes

**SENATE:**

**CONFERENCE:**

## Committee Markup Annual

## **FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.506												
FFS CLAIMS RUNOUT - 90841C												
CORE												
PROGRAM-SPECIFIC	0	0.00	0	0.00	58,313,932	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	20,723,329	0.00	0	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	37,590,603	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$58,313,932	0.00	\$0	0.00	\$0	0.00	\$0	0.00

TOTAL - FFS CLAIMS RUNOUT	\$0	0.00	\$0	0.00	\$58,313,932	0.00	\$0	0.00	\$0	0.00	\$0	0.00
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## DEPARTMENT OF SOCIAL SERVICES

### Section 11.510      MO HealthNet Division – Hospital Services

Book 5, Page 460

This section provides funding for inpatient and outpatient hospital services provided to eligible Missouri Medicaid recipients.

<b>Legal Base:</b>	RSMo 208.152, 208.153, 208.453; Federal – Social Security Act Section Number: 1903(w), 1905(a) (1), (2), 1923(a-f), 42 CFR 440.10, 440.20, 412.106, and 433 Subpart B.
<b>Funding Sources:</b>	General Revenue, Federal, Uncompensated Care (UC), Federal Reimbursement Allowance (FRA), Health Initiatives (HIF), Healthy Families Trust Fund – Health Care Account (HFTF), and Third Party Liability Collections Fund
<b>FY 2018 GR W/H:</b>	\$200,000 ( <i>as of March 29, 2018</i> )

### CORE ADJUSTMENTS:

#### DEPARTMENT:

Core reduction:	(\$100,000) OTH PSD core reduction of one-time expenditure for Medicaid ER reduction program
Core reallocation in:	\$115,383,870 (GR \$21,631,618 PSD & FED \$93,752,252 PSD) reallocated in from Managed Care section
Core reallocation within:	± \$1,001,750 (GR \$20,875; FED \$20,875; & OTH \$960,000) PSD reallocated to EE within section to more closely align budget with planned expenditures

#### GOVERNOR:

Core reduction:	(\$28,738,110) (GR \$10,000,000 PSD & FED \$18,738,110 PSD) core reduction from cost containment initiatives (\$544,657) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP) (\$200,000) (GR \$100,000 PSD & FED \$100,000 PSD) core reduction to Tele-monitoring program – current FY 2018 withhold (\$200,000) (GR \$100,000 EE & FED \$100,000 EE) core reduction to the pager project – current FY 2018 withhold
Core reallocation out:	(\$3,251,059) GR PSD reallocated out to Managed Care section
Core reallocation in:	\$3,237,237 FED PSD reallocated in from Managed Care section

#### HOUSE:

Core restoration:	\$200,000 (GR \$100,000 PSD & FED \$100,000 PSD) core restoration for Pager Project (wireless medication notification program) \$200,000 (GR \$100,000 EE & FED \$100,000 EE) core restoration for Tele-monitoring program
Core reallocation out:	(\$6,315,414) (GR \$20,875 EE; GR \$2,443,416 PSD; & FED \$3,851,123 PSD) reallocated out to MHD Admin & IT sections for administrative functions of such program
Core reallocation within:	± \$980,875 (FED \$20,875 & OTH \$960,000) EE reallocated to PSD within section to more closely align budget with planned expenditures

#### SENATE:

#### CONFERENCE:



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510												
HOSPITAL CARE - 90552C												
CORE												
EXPENSE & EQUIPMENT	730,000	0.00	3,345,945	0.00	630,000	0.00	1,631,750	0.00	1,431,750	0.00	630,000	0.00
GENERAL REVENUE	150,000	0.00	0	0.00	100,000	0.00	120,875	0.00	20,875	0.00	100,000	0.00
FEDERAL FUNDS	365,000	0.00	2,173,697	0.00	315,000	0.00	335,875	0.00	235,875	0.00	315,000	0.00
OTHER FUNDS	215,000	0.00	1,172,248	0.00	215,000	0.00	1,175,000	0.00	1,175,000	0.00	215,000	0.00
PROGRAM-SPECIFIC	654,760,955	0.00	683,146,586	0.00	384,689,814	0.00	498,971,934	0.00	469,475,345	0.00	464,361,681	0.00
GENERAL REVENUE	35,823,431	0.00	35,423,431	0.00	9,007,792	0.00	30,618,535	0.00	16,722,819	0.00	14,379,403	0.00
FEDERAL FUNDS	392,199,129	0.00	426,129,967	0.00	247,094,653	0.00	340,826,030	0.00	325,225,157	0.00	321,494,909	0.00
OTHER FUNDS	226,738,395	0.00	221,593,188	0.00	128,587,369	0.00	127,527,369	0.00	127,527,369	0.00	128,487,369	0.00
TOTAL	\$655,490,955	0.00	\$686,492,531	0.00	\$385,319,814	0.00	\$500,603,684	0.00	\$470,907,095	0.00	\$464,991,681	0.00

Year 1 Asset Limit CTC - 0000016

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	10,493,288	0.00	4,350,691	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	475,956	0.00	192,133	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	6,742,987	0.00	2,836,781	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	3,274,345	0.00	1,321,777	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$10,493,288	0.00	\$4,350,691	0.00	\$0	0.00	

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

Year 2 Asset Limit Increase - 0000017

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,954,021	0.00	2,767,697	0.00	0	0.00	
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	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.510												
HOSPITAL CARE - 90552C												
Year 2 Asset Limit Increase - 0000017												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	3,954,021	0.00	2,767,697	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	165,508	0.00	122,225	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	2,554,693	0.00	1,804,622	0.00	0	0.00
OTHER FUNDS	0	0.00	0	0.00	0	0.00	1,233,820	0.00	840,850	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$3,954,021	0.00	\$2,767,697	0.00	\$0	0.00

Funding for services for additional individuals who will become Medicaid eligible as a result of HB 1565 which raises MO HealthNet asset limits for permanently and totally disabled, blind, and aged claimants from \$2,000 to \$3,000 for individuals and \$4,000 to 6,000 for married couples in 2019. The asset limits will continue to increase annually by \$1,000 for individuals and \$2,000 for married couples until reaching \$5,000 and \$10,000 respectively in 2021.

MHD COST TO CONTINUE - 1886001													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	189,259,918	0.00	114,509,446	0.00	0	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	45,311,577	0.00	8,151,584	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	90,401,911	0.00	49,141,449	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	53,546,430	0.00	57,216,413	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$189,259,918	0.00	\$114,509,446	0.00	\$0	0.00	

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	544,657	0.00	544,657	0.00	

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.510													
HOSPITAL CARE - 90552C													
FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	544,657	0.00	544,657	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	544,657	0.00	544,657	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$544,657	0.00	\$544,657	0.00	
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.													

TOTAL - HOSPITAL CARE	\$655,490,955	0.00	\$686,492,531	0.00	\$385,319,814	0.00	\$704,310,911	0.00	\$593,079,586	0.00	\$465,536,338	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.515**      **MO HealthNet Divisions – Tier 1 Safety Net Hospitals**

Book 6, Page 476

This section provides ongoing funding to reimburse for health care services provided to Medicaid clients and the uninsured through Tier 1 Safety Net Hospitals. Enhanced payments are made to Truman Medical Center Physicians and UM-Kansas City Physicians.

**Legal Base:** 208.152, 208.153, RSMo; Social Security Act Sections 1905(a) (1) and (2), 1923(a)-(f); Federal Regulations 42 CFR 440.10 and 440.20  
**Funding Sources:** Federal  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.515													
PHYSICIAN PAYMENTS SAFETY NET - 90558C													
CORE													
PROGRAM-SPECIFIC	8,000,000	0.00	8,000,000	0.00	13,722,792	0.00	13,722,792	0.00	13,722,792	0.00	13,722,792	0.00	
FEDERAL FUNDS	8,000,000	0.00	8,000,000	0.00	13,722,792	0.00	13,722,792	0.00	13,722,792	0.00	13,722,792	0.00	
TOTAL	\$8,000,000	0.00	\$8,000,000	0.00	\$13,722,792	0.00	\$13,722,792	0.00	\$13,722,792	0.00	\$13,722,792	0.00	

MHD COST TO CONTINUE - 1886001													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	1,632,113	0.00	0	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	1,632,113	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,632,113	0.00	\$0	0.00	
Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.													

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.515													
PHYSICIAN PAYMENTS SAFETY NET - 90558C													
FFS Supplemental Payments - 1886036													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,000,000	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	2,000,000	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,000,000	0.00	
This decision item provides federal funding for supplemental payments under the fee-for-service program, as approved by CMS, to physicians and other healthcare professionals at Tier 1 Safety Net Hospitals.													

TOTAL - PHYSICIAN PAYMENTS SAFETY NET	\$8,000,000	0.00	\$8,000,000	0.00	\$13,722,792	0.00	\$13,722,792	0.00	\$15,354,905	0.00	\$15,722,792	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.520**      **MO HealthNet Divisions – Federally Qualified Health Centers FQHCs**

Book 6, Page 484

This section provides funding for FQHCs to expand access to primary care services for underserved individuals by expanding hours of operation, defraying costs for the uninsured and funding provider staff and infrastructure.

**Legal Base:** RSMo 208.152, 208.166, 660.026; Federal – Social Security Act Section Number: 1905(a) (2), 42 CFR 440.210 and 440.500.  
**Funding Sources:** General Revenue and Healthcare Technology Fund  
**FY 2018 GR W/H:** \$37,636 (*as of March 29, 2018*)

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$37,635) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)  
(\$52,698) GR PSD core reduction – equal to the provider rate increase added in FY 2018

**HOUSE:**

Core restoration: \$37,635 GR PSD core restoration – equal to the provider rate increase added in FY 2018 – reverse Governor’s core reduction listed above

**SENATE:**

**CONFERENCE:**



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.520												
FQHC DISTRIBUTION - 90559C												
CORE												
PROGRAM-SPECIFIC	15,000,826	0.00	11,663,693	0.00	12,368,722	0.00	12,368,722	0.00	12,278,389	0.00	12,316,024	0.00
GENERAL REVENUE	6,183,830	0.00	6,038,552	0.00	6,165,350	0.00	6,165,350	0.00	6,075,017	0.00	6,112,652	0.00
FEDERAL FUNDS	8,759,115	0.00	5,567,260	0.00	6,203,372	0.00	6,203,372	0.00	6,203,372	0.00	6,203,372	0.00
OTHER FUNDS	57,881	0.00	57,881	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$15,000,826	0.00	\$11,663,693	0.00	\$12,368,722	0.00	\$12,368,722	0.00	\$12,278,389	0.00	\$12,316,024	0.00

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	52,698	0.00	52,698	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	52,698	0.00	52,698	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$52,698	0.00	\$52,698	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

Health Home Expansion - 1886026

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	764,640	0.00	764,640	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	0	0.00	273,282	0.00	273,282	0.00	

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.520													
FQHC DISTRIBUTION - 90559C													
Health Home Expansion - 1886026													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	764,640	0.00	764,640	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	491,358	0.00	491,358	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$764,640	0.00	\$764,640	0.00	
Provides funding to expand the primary care health home program.													

TOTAL - FQHC DISTRIBUTION	\$15,000,826	0.00	\$11,663,693	0.00	\$12,368,722	0.00	\$12,368,722	0.00	\$13,095,727	0.00	\$13,133,362	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.525**      **MO HealthNet Division – FRA Health Care Homes**

Book 6, Page 494

This section provides funding for payments for MO HealthNet participants with chronic conditions through intergovernmental transfers for health home sites affiliated with public entities. Health home sites will receive per-member-per-month (PMPM) payments for the additional services they will be required to perform.

**Legal Base:** Federal law – Section 2703 of the Affordable Care Act & Section 1945 of Title XIX of the Social Security Act  
**Funding Sources:** Federal funds and Intergovernmental Transfer (IGT) fund  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$76,243) OTH PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

**HOUSE:**

Same as Governor – no additional core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.525													
FRA HEALTH CARE HOME - 90574C													
CORE													
PROGRAM-SPECIFIC	7,353,934	0.00	5,510,063	0.00	8,105,166	0.00	8,105,166	0.00	8,028,923	0.00	8,028,923	0.00	
FEDERAL FUNDS	4,900,000	0.00	3,656,129	0.00	5,208,568	0.00	5,208,568	0.00	5,208,568	0.00	5,208,568	0.00	
OTHER FUNDS	2,453,934	0.00	1,853,934	0.00	2,896,598	0.00	2,896,598	0.00	2,820,355	0.00	2,820,355	0.00	
TOTAL	\$7,353,934	0.00	\$5,510,063	0.00	\$8,105,166	0.00	\$8,105,166	0.00	\$8,028,923	0.00	\$8,028,923	0.00	

FMAP Adjustment - 1886022

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	76,243	0.00	76,243	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	76,243	0.00	76,243	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$76,243	0.00	\$76,243	0.00	

Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.

Health Home Expansion - 1886026

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	3,532,636	0.00	3,532,636	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	2,270,072	0.00	2,270,072	0.00	

Committee Markup Annual			FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
FY 2017 BUDGET			FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED			
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE		
HOUSE BILL SECTION 11.525														
FRA HEALTH CARE HOME - 90574C														
Health Home Expansion - 1886026														
PROGRAM-SPECIFIC		0	0.00	0	0.00	0	0.00	0	0.00	3,532,636	0.00	3,532,636	0.00	
OTHER FUNDS		0	0.00	0	0.00	0	0.00	0	0.00	1,262,564	0.00	1,262,564	0.00	
TOTAL		\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$3,532,636	0.00	\$3,532,636	0.00	
Provides funding to expand the primary care health home program.														
TOTAL - FRA HEALTH CARE HOME														
\$7,353,934	0.00		\$5,510,063	0.00	\$8,105,166	0.00	\$8,105,166	0.00	\$11,637,802	0.00	\$11,637,802	0.00		



DEPARTMENT OF SOCIAL SERVICES  
**MO HealthNet Division – Regional Care Coordination Model**

Book N/A

This section provides funding to develop a Regional Care Coordination Model(s) among networks of health care providers to meet the needs of and costs incurred by Medicaid beneficiaries that frequently and inefficiently utilize emergency department (ED) services. This pilot project, with communities surrounding the Christian Hospital in St. Louis, shall create a model to be replicated across the state.

**Legal Base:**

**Funding Sources:** General Revenue and Federal

**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

Funding was cut in the FY 2018 Budget (2017 Session).



	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.525													
REGIONAL CARE COORDINATION - 90578C													
CORE													
PROGRAM-SPECIFIC	2,000,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	
GENERAL REVENUE	200,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	
FEDERAL FUNDS	1,800,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	
TOTAL	\$2,000,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	

## DEPARTMENT OF SOCIAL SERVICES

### **Section 11.530**      **MO HealthNet Division – Federal Reimbursement Allowance**

Book 6, Page 502

This section provides funding for the federal reimbursement allowance hospital care program under Title XIX of the Social Security Act.

**Legal Base:** RSMo 208.453; Federal – Social Security Act Section Number: 1903(w), 42 CFR 433 Subpart B.  
**Funding Sources:** Federal Reimbursement Allowance (FRA)  
**FY 2018 GR W/H:** N/A

### **CORE ADJUSTMENTS:**

#### **DEPARTMENT:**

Core reallocation within:  $\pm$  \$200,000 OTH PSD reallocated to EE within section to more closely align budget with planned expenditures  
Requested an “E”.

#### **GOVERNOR:**

Core reduction: (\$18,120,051) OTH PSD core reduction from cost containment initiatives  
Recommended an “E”.

#### **HOUSE:**

Core restoration: \$18,120,051 OTH PSD core restoration – reverse Governor’s core reduction listed above  
Core reallocation within:  $\pm$  \$200,000 OTH EE reallocated to PSD within section to more closely align budget with planned expenditures  
Removed the “E”.

#### **SENATE:**

#### **CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.530													
FED REIMB ALLOWANCE - 90553C													
CORE													
EXPENSE & EQUIPMENT	0	0.00	190,760	0.00	0	0.00	200,000	0.00	200,000	0.00	0	0.00	
OTHER FUNDS	0	0.00	190,760	0.00	0	0.00	200,000 E	0.00	200,000 E	0.00	0	0.00	
PROGRAM-SPECIFIC	1,125,818,734	0.00	1,071,132,150	0.00	1,280,818,734	0.00	1,280,618,734	0.00	1,262,498,683	0.00	1,280,818,734	0.00	
OTHER FUNDS	1,125,818,734	0.00	1,071,132,150	0.00	1,280,818,734	0.00	1,280,618,734 E	0.00	1,262,498,683 E	0.00	1,280,818,734	0.00	
TOTAL	\$1,125,818,734	0.00	\$1,071,322,910	0.00	\$1,280,818,734	0.00	\$1,280,818,734	0.00	\$1,262,698,683	0.00	\$1,280,818,734	0.00	

MHD COST TO CONTINUE - 1886001													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	114,528,895	0.00	89,308,321	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	114,528,895 E	0.00	89,308,321 E	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$114,528,895	0.00	\$89,308,321	0.00	\$0	0.00	

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

TOTAL - FED REIMB ALLOWANCE	\$1,125,818,734	0.00	\$1,071,322,910	0.00	\$1,280,818,734	0.00	\$1,395,347,629	0.00	\$1,352,007,004	0.00	\$1,280,818,734	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.535**      **MO HealthNet Division – Intergovernmental Transfer (IGT)**

Book 6, Page 600

This section provides the accounting mechanism for the transfer of funds from the DSS Intergovernmental Transfer (IGT) Fund to the General Revenue Fund for the purpose of providing the state match for Medicaid payments.

**Legal Base:**            N/A  
**Funding Sources:**    Intergovernmental Transfer (IGT) Fund  
**FY 2018 GR W/H:**    N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**  
No core changes

**GOVERNOR:**  
No core changes

**HOUSE:**  
No core changes

**SENATE:**

**CONFERENCE:**

Committee Markup Annual			FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills
FY 2017 BUDGET			FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
DOLLAR	FTE		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.535													
IGT EXPEND TRANSFER - 90570C													
CORE													
FUND TRANSFERS	96,885,215	0.00	82,911,914	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	
OTHER FUNDS	96,885,215	0.00	82,911,914	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	96,885,215	0.00	
TOTAL	\$96,885,215	0.00	\$82,911,914	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	
TOTAL - IGT EXPEND TRANSFER	\$96,885,215	0.00	\$82,911,914	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	\$96,885,215	0.00	

DEPARTMENT OF SOCIAL SERVICES

**Section 11.540**      **MO HealthNet Division – Payments to Tier 1 Safety Net Hospitals with Intergovernmental Transfer (IGT)**

Book 6, Page 512

This section provides the accounting mechanism for the payment of funds to Tier 1 Safety Net Hospitals using Intergovernmental transfers. Payments from this program are made to MU Hospitals and Clinics; MO Rehabilitation Center; and Truman Medical Center.

**Legal Base:** N/A  
**Funding Sources:** Intergovernmental Transfer (IGT) Fund & Federal Funds  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

Core reallocation out: (\$26,390,604) (FED \$17,417,301 PSD & OTH \$8,973,303 PSD) reallocated out to Managed Care for supplemental payments to hospital & physicians

**SENATE:**

**CONFERENCE:**

Committee Markup Annual		FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
		FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.540													
IGT SAFETY NET HOSPITALS - 90571C													
CORE													
PROGRAM-SPECIFIC		99,854,549	0.00	21,295,880	0.00	64,531,450	0.00	64,531,450	0.00	64,531,450	0.00	38,140,846	0.00
FEDERAL FUNDS		61,505,748	0.00	15,018,871	0.00	41,182,649	0.00	41,182,649	0.00	41,182,649	0.00	23,765,348	0.00
OTHER FUNDS		38,348,801	0.00	6,277,009	0.00	23,348,801	0.00	23,348,801	0.00	23,348,801	0.00	14,375,498	0.00
TOTAL		\$99,854,549	0.00	\$21,295,880	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$38,140,846	0.00
TOTAL - IGT SAFETY NET HOSPITALS		\$99,854,549	0.00	\$21,295,880	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$64,531,450	0.00	\$38,140,846	0.00

DEPARTMENT OF SOCIAL SERVICES

**Section 11.545**      **MO HealthNet Division – Intergovernmental Transfer (IGT) for DMH Medicaid Program**

Book 6, Page 520

This section provides funding to allow MO HealthNet to pay DMH for CSTAR and CPR services using the certified public expenditures (CPE) process and Intergovernmental Transfer (IGT). This transfer proves to CMS that the state match is available for the CPR and CSTAR programs.

**Legal Base:** N/A  
**Funding Sources:** Intergovernmental Transfer (IGT) Fund  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**



	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.545													
IGT DMH MEDICAID PROGRAM - 90572C													
CORE													
PROGRAM-SPECIFIC	367,321,872	0.00	351,415,069	0.00	425,025,880	0.00	425,025,880	0.00	425,025,880	0.00	425,025,880	0.00	
FEDERAL FUNDS	232,250,273	0.00	222,419,145	0.00	277,048,873	0.00	277,048,873	0.00	277,048,873	0.00	277,048,873	0.00	
OTHER FUNDS	135,071,599	0.00	128,995,924	0.00	147,977,007	0.00	147,977,007	0.00	147,977,007	0.00	147,977,007	0.00	
TOTAL	\$367,321,872	0.00	\$351,415,069	0.00	\$425,025,880	0.00	\$425,025,880	0.00	\$425,025,880	0.00	\$425,025,880	0.00	

DMH IGT Authority CTC - 1886002

PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	15,450,706	0.00	255,621,114	0.00	255,621,114	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	6,001,381	0.00	223,028,773	0.00	223,028,773	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	9,449,325	0.00	32,592,341	0.00	32,592,341	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$15,450,706	0.00	\$255,621,114	0.00	\$255,621,114	0.00	

Based on projected MO HealthNet and Department of Mental Health (DMH) expenditures for FY18, additional authority is requested to support increased DMH payments through the DMH Intergovernmental Transfer (IGT). An additional amount is requested for projected FY19 utilization increase in DMH.

TOTAL - IGT DMH MEDICAID PROGRAM	\$367,321,872	0.00	\$351,415,069	0.00	\$425,025,880	0.00	\$440,476,586	0.00	\$680,646,994	0.00	\$680,646,994	0.00	
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DEPARTMENT OF SOCIAL SERVICES  
**MO HealthNet Division – Women’s Health Services**

Book N/A

This section provides funding for women’s health services and family planning services.

**Legal Base:** RSMo 208.453, 208.152, 208.153  
**Funding Sources:** General Revenue  
**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

Funding was transferred out to HB 10 Department of Health and Senior Services in the Fiscal Year 2018 budget

## Committee Markup Annual

**FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.545												
WOMEN'S HEALTH SRVC - 90554C												
CORE												
PROGRAM-SPECIFIC	10,790,923	0.00	6,542,043	0.00	0	0.00	0	0.00	0	0.00	0	0.00
GENERAL REVENUE	10,790,923	0.00	6,542,043	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$10,790,923	0.00	\$6,542,043	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

TOTAL - WOMEN'S HEALTH SRVC	\$10,790,923	0.00	\$6,542,043	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.550**      **MO HealthNet Division – Children’s Health Insurance Program (CHIP)**

Book 6, Page 532

This section provides funding for the State Children’s Health Insurance Program (CHIP), which is designed to enhance access to care for uninsured children. The state children’s health insurance program (CHIP) Title XXI funds are used for this expanded MO HealthNet population.

**Legal Base:** RSMo 208.453, 208.152, 208.153; Federal – Social Security Act Section Number 1115, 2100, 1903(w), 1923 (a-f), 42 CFR 433 Subpart B and 412.106.  
**Funding Sources:** General Revenue, Federal, Federal Reimbursement Allowance (FRA), Health Initiatives (HIF), Pharmacy Rebates (REBATE), Premium (PREMIUM), Medicaid Managed Care Organization Reimbursement Allowance, and Pharmacy Reimbursement Allowance  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reduction: (\$11,982,595) (GR \$3,483,056 PSD & FED \$8,499,539 PSD) core reduction due to anticipated lapse  
(\$529,622) (GR \$136,309 PSD & FED \$393,313 PSD) core reduction of one-time costs for statewide Managed Care transition  
(\$567,663) FED PSD core reduction of one-time Federal Funds

**GOVERNOR:**

Core reduction: (\$576,595) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

**HOUSE:**

Core reallocation within:  $\pm$  \$1,200,000 (GR \$504,000 & FED \$696,000) EE reallocated to PSD within section to more closely align budget with planned expenditures

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550												
CHILDREN'S HEALTH INS PROGRAM - 90556C												
CORE												
EXPENSE & EQUIPMENT	1,200,000	0.00	1,655,970	0.00	1,200,000	0.00	1,200,000	0.00	1,200,000	0.00	0	0.00
GENERAL REVENUE	504,000	0.00	383,258	0.00	504,000	0.00	504,000	0.00	504,000	0.00	0	0.00
FEDERAL FUNDS	696,000	0.00	1,272,712	0.00	696,000	0.00	696,000	0.00	696,000	0.00	0	0.00
PROGRAM-SPECIFIC	91,552,778	0.00	78,537,999	0.00	92,318,698	0.00	79,238,818	0.00	78,662,223	0.00	79,862,223	0.00
GENERAL REVENUE	14,000,145	0.00	11,648,134	0.00	15,054,408	0.00	11,435,043	0.00	10,858,448	0.00	11,362,448	0.00
FEDERAL FUNDS	69,833,429	0.00	59,170,661	0.00	69,545,086	0.00	60,084,571	0.00	60,084,571	0.00	60,780,571	0.00
OTHER FUNDS	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00
TOTAL	\$92,752,778	0.00	\$80,193,969	0.00	\$93,518,698	0.00	\$80,438,818	0.00	\$79,862,223	0.00	\$79,862,223	0.00

MO HEALTHNET GR PICKUP - 1886018												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	567,663	0.00	567,663	0.00	567,663	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	567,663	0.00	567,663	0.00	567,663	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$567,663	0.00	\$567,663	0.00	\$567,663	0.00

Funding is required to backfill one-time funds budgeted in FY18. One-time cash sources include enhanced Children's Health Insurance Premium (CHIP) federal match, Healthy Families Trust Fund, Life Sciences Research Trust Fund, and Premium Fund. There are corresponding core reductions associated with this GR pickup.

Pharmacy PMPM Inc-Specialty - 1886011												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	806,001	0.00	799,408	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	201,621	0.00	194,712	0.00	0	0.00

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.550												
CHILDREN'S HEALTH INS PROGRAM - 90556C												
Pharmacy PMPM Inc-Specialty - 1886011												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	806,001	0.00	799,408	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	604,380	0.00	604,696	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$806,001	0.00	\$799,408	0.00	\$0	0.00
An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated specialty PMPM rate of 7.82% is expected in FY19. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects an Express Scripts forecast.												

Phrmacy PMPM Inc-Non Specialty - 1886012												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	94,706	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	23,691	0.00	0	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	71,015	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$94,706	0.00	\$0	0.00	\$0	0.00
An increase is needed in the pharmacy program due to increased cost of non-specialty drugs. An estimated non-specialty PMPM rate of 1.15% is expected in FY19. Request reflects an Express Scripts forecast.												

Mngd Care Actuarial Rate Inc - 1886007												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	988,301	0.00	987,715	0.00	987,715	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	247,223	0.00	240,578	0.00	240,578	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.550													
CHILDREN'S HEALTH INS PROGRAM - 90556C													
Mngd Care Actuarial Rate Inc - 1886007													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	988,301	0.00	987,715	0.00	987,715	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	741,078	0.00	747,137	0.00	747,137	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$988,301	0.00	\$987,715	0.00	\$987,715	0.00	
Federal rule requires payments made on behalf of managed care participants be actuarially sound. This is a 1.9% actuarial increase to FY19 rates related to increases in utilization and cost components.													

Managed Care Hlth Insurer Fee - 1886008													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	1,611,387	0.00	1,611,387	0.00	1,611,387	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	403,088	0.00	403,088	0.00	403,088	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	1,208,299	0.00	1,208,299	0.00	1,208,299	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$1,611,387	0.00	\$1,611,387	0.00	\$1,611,387	0.00	
This is an increase to FY19 Managed Care expenditures related to Federally Mandated Health Insurer Fee (HIF). This assumes no moratorium on the CY19 fees. HIF moratorium is currently through CY17.													

Managed Care Withhold Release - 1886009													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	731,926	0.00	664,172	0.00	664,172	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	183,091	0.00	161,772	0.00	161,772	0.00	

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.550													
CHILDREN'S HEALTH INS PROGRAM - 90556C													
Managed Care Withhold Release - 1886009													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	731,926	0.00	664,172	0.00	664,172	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	548,835	0.00	502,400	0.00	502,400	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$731,926	0.00	\$664,172	0.00	\$664,172	0.00	
This assumes all withholds will be 100% released. Health Plan withhold releases deferred from FY17/FY18 rate year. This is expected releases over the prior year due to moving from a 2.5% withhold to a 5% withhold and also increased withhold on Statewide enrollment. This was included as an FY18 offset to MC transition costs in FY18 Gov Rec.													

FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	576,595	0.00	576,595	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	576,595	0.00	576,595	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$576,595	0.00	\$576,595	0.00	
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.													

TOTAL - CHILDREN'S HEALTH INS PROGRAM	\$92,752,778	0.00	\$80,193,969	0.00	\$93,518,698	0.00	\$85,238,802	0.00	\$85,069,163	0.00	\$84,269,755	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.551 MO HealthNet Division – Federal Transfer to CHIP Increased Enhancement Fund**

Book N/A

This section provides funding for the transfer of any enhanced federal CHIP match funds (any funds over the regular federal match rate for CHIP kids) that was deposited into the Federal Fund (0163) during the last 3 quarters of FY2018 into the CHIP Increased Enhancement Fund (0492).

**Funding Sources:** Federal Fund (0163) – Title XIX

**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

New section recommended by the House.

**GOVERNOR:**

New section recommended by the House.

**HOUSE:**

New section recommended by the House through NDI.

**SENATE:**

**CONFERENCE:**

## Committee Markup Annual

## FY2019 DEPARTMENT OF SOCIAL SERVICES

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.551												
CHIP INC ENHANCE TRF - 90589C												
Increased Enhancement CHIP Trf - 1886042												
FUND TRANSFERS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	40,500,000	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	40,500,000	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$40,500,000	0.00
This transfer allows for the ACA enhanced CHIP funding earned in FY18 to be transferred to the CHIP Increased Enhancement Fund in FY19. ACA enhanced CHIP funding earned in FY19 will be deposited directly to the CHIP Increased Enhancement Fund.												
TOTAL - CHIP INC ENHANCE TRF	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$40,500,000	0.00

## DEPARTMENT OF SOCIAL SERVICES

### Section 11.555      MO HealthNet Division – Show-Me Healthy Babies Program

Book 6, Page 551

This section would provide funding for approximately 1,800 – 1,850 unborn children up to 300% of the Federal Poverty Level (FPL) as authorized by Senate Bill 754 (2014). This program provides all prenatal care and pregnancy-related services that benefit the health of the unborn and promote healthy labor, delivery, and birth. For an unborn child to be eligible for enrollment in the program, the mother of the child must not be eligible for coverage under the Medicaid Program and must not have access to other affordable health care coverage. Coverage for the unborn child is for the period of conception to birth and shall continue up to one year after birth. Pregnancy-related and postpartum coverage for the mother shall begin on the day the pregnancy ends and extend through the last day of the month that includes the sixtieth day after pregnancy ends.

**Legal Base:** RSMo 208.662.  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** \$0

### CORE ADJUSTMENTS:

#### DEPARTMENT:

Core reduction: (\$110,509) (GR \$28,441 PSD & FED \$82,068 PSD) core reduction of one-time costs for statewide Managed Care transition

#### GOVERNOR:

Core reduction: (\$198,679) GR PSD core reduction due to a change in the Federal Medical Assistance Percentage (FMAP)

#### HOUSE:

Same as Governor – no additional core changes

#### SENATE:

#### CONFERENCE:

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.555												
SHOW-ME BABIES - 88855C												
CORE												
EXPENSE & EQUIPMENT	40,000	0.00	0	0.00	40,000	0.00	40,000	0.00	40,000	0.00	40,000	0.00
GENERAL REVENUE	20,000	0.00	0	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00
FEDERAL FUNDS	20,000	0.00	0	0.00	20,000	0.00	20,000	0.00	20,000	0.00	20,000	0.00
PROGRAM-SPECIFIC	21,872,373	0.00	17,867,652	0.00	13,948,802	0.00	13,838,293	0.00	13,639,614	0.00	13,639,614	0.00
GENERAL REVENUE	3,461,466	0.00	3,480,866	0.00	3,490,090	0.00	3,461,649	0.00	3,262,970	0.00	3,262,970	0.00
FEDERAL FUNDS	16,246,593	0.00	12,222,472	0.00	10,458,712	0.00	10,376,644	0.00	10,376,644	0.00	10,376,644	0.00
OTHER FUNDS	2,164,314	0.00	2,164,314	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$21,912,373	0.00	\$17,867,652	0.00	\$13,988,802	0.00	\$13,878,293	0.00	\$13,679,614	0.00	\$13,679,614	0.00

MHD COST TO CONTINUE - 1886001												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	14,597,112	0.00	14,405,842	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	3,653,700	0.00	3,616,454	0.00	0	0.00
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	10,943,412	0.00	10,789,388	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$14,597,112	0.00	\$14,405,842	0.00	\$0	0.00

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

Mngd Care Actuarial Rate Inc - 1886007												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	773,837	0.00	692,805	0.00	692,805	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	193,575	0.00	168,747	0.00	168,747	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.555													
SHOW-ME BABIES - 88855C													
Mngd Care Actuarial Rate Inc - 1886007													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	773,837	0.00	692,805	0.00	692,805	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	580,262	0.00	524,058	0.00	524,058	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$773,837	0.00	\$692,805	0.00	\$692,805	0.00	
Federal rule requires payments made on behalf of managed care participants be actuarially sound. This is a 1.9% actuarial increase to FY19 rates related to increases in utilization and cost components.													

Managed Care Hlth Insurer Fee - 1886008													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	806,843	0.00	806,843	0.00	806,843	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	201,832	0.00	201,832	0.00	201,832	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	605,011	0.00	605,011	0.00	605,011	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$806,843	0.00	\$806,843	0.00	\$806,843	0.00	
This is an increase to FY19 Managed Care expenditures related to Federally Mandated Health Insurer Fee (HIF). This assumes no moratorium on the CY19 fees. HIF moratorium is currently through CY17.													

Managed Care Withhold Release - 1886009													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	365,963	0.00	322,086	0.00	322,086	0.00	
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	91,546	0.00	78,450	0.00	78,450	0.00	

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE		
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.555													
SHOW-ME BABIES - 88855C													
Managed Care Withhold Release - 1886009													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	365,963	0.00	322,086	0.00	322,086	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	274,417	0.00	243,636	0.00	243,636	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$365,963	0.00	\$322,086	0.00	\$322,086	0.00	
This assumes all withholds will be 100% released. Health Plan withhold releases deferred from FY17/FY18 rate year. This is expected releases over the prior year due to moving from a 2.5% withhold to a 5% withhold and also increased withhold on Statewide enrollment. This was included as an FY18 offset to MC transition costs in FY18 Gov Rec.													

FMAP Adjustment - 1886022													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	0	0.00	198,679	0.00	198,679	0.00	
FEDERAL FUNDS	0	0.00	0	0.00	0	0.00	0	0.00	198,679	0.00	198,679	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$198,679	0.00	\$198,679	0.00	
Due to an increase in the blended FMAP rate, there will be a net cost shift from GR to federal funds. There is also a corresponding GR reduction in order to realign the match rate within programs. The FY18 blended FMAP rate is 64.260% and the FY19 blended FMAP rate is 65.203%.													

TOTAL - SHOW-ME BABIES	\$21,912,373	0.00	\$17,867,652	0.00	\$13,988,802	0.00	\$30,422,048	0.00	\$30,105,869	0.00	\$15,700,027	0.00	
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DEPARTMENT OF SOCIAL SERVICES

**Section 11.560 & 11.565 MO HealthNet Division – Federal Reimbursement Allowance Transfer**

Book 6, Pages 601 & 602

These transfer sections allow funding to be transferred between General Revenue and the Federal Reimbursement Allowance Fund.

**Funding Sources:** General Revenue and Federal Reimbursement Allowance Fund  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**



## Committee Markup Annual

## FY2019 DEPARTMENT OF SOCIAL SERVICES

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.560												
GR FRA-TRANSFER - 90840C												
CORE												
FUND TRANSFERS	632,107,500	0.00	579,680,537	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00
GENERAL REVENUE	632,107,500	0.00	579,680,537	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00
TOTAL	\$632,107,500	0.00	\$579,680,537	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00
TOTAL - GR FRA-TRANSFER	\$632,107,500	0.00	\$579,680,537	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00

## Committee Markup Annual

## FY2019 DEPARTMENT OF SOCIAL SERVICES

## Regular House Bills

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.565												
FED REIMBURSE ALLOW-TRANSFER - 90845C												
CORE												
FUND TRANSFERS	632,107,500	0.00	579,680,537	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00
OTHER FUNDS	632,107,500	0.00	579,680,537	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00	653,701,378	0.00
TOTAL	\$632,107,500	0.00	\$579,680,537	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00
TOTAL - FED REIMBURSE ALLOW-TRANSFER	\$632,107,500	0.00	\$579,680,537	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00	\$653,701,378	0.00



DEPARTMENT OF SOCIAL SERVICES

**Section 11.570 & 11.575 MO HealthNet Division – Nursing Facility FRA Transfer**

Book 6, Pages 603 & 604

These transfer sections allow funding to be transferred between General Revenue and the Nursing Facility Federal reimbursement Allowance Fund.

**Legal Basis:** N/A  
**Funding Sources:** General Revenue and Nursing Facility Federal Reimbursement Allowance (NFFRA)  
**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**

Committee Markup Annual	FY2019 DEPARTMENT OF SOCIAL SERVICES												Regular House Bills
	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED		
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	
HOUSE BILL SECTION 11.570													
GR NFFRA-TRANSFER - 90850C													
CORE													
FUND TRANSFERS	210,950,510	0.00	195,053,491	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	
GENERAL REVENUE	210,950,510	0.00	195,053,491	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	
TOTAL	\$210,950,510	0.00	\$195,053,491	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	
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	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.575												
NURSING FACILITY REIM-TRANSFER - 90855C												
CORE												
FUND TRANSFERS	210,950,510	0.00	195,053,491	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
OTHER FUNDS	210,950,510	0.00	195,053,491	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
TOTAL	\$210,950,510	0.00	\$195,053,491	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
TOTAL - NURSING FACILITY REIM-TRANSFEE	\$210,950,510	0.00	\$195,053,491	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00



DEPARTMENT OF SOCIAL SERVICES

**Section 11.580**      **MO HealthNet Division – Nursing Home Program - NFFRA Transfer to Quality of Care Fund**

Book 6, Page 605

This section transfers moneys from the Nursing Facility Federal Reimbursement Allowance Fund to the Nursing Facility Quality of Care Fund to be used for additional inspections and other quality of care activities.

**Funding Sources:**    Nursing Facility Federal Reimbursement Allowance (NFFRA)  
**FY 2018 GR W/H:**    N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE:**

**CONFERENCE:**



## Committee Markup Annual

**FY2019 DEPARTMENT OF SOCIAL SERVICES**

## Regular House Bills

[illegible]

DEPARTMENT OF SOCIAL SERVICES

**Section 11.585**      **MO HealthNet Division – Nursing Facility Federal Reimbursement Allowance Payments**

Book 6, Page 563

This section provides funding for per diem payments for patient care provided in nursing facilities under Title XIX of the Social Security Act.

**Legal Base:** RSMo 198.401; Federal – Social Security Act Section Number 1903 (w), 42 CFR 443 Subpart B.

**Funding Sources:** Nursing Facility Federal Reimbursement Allowance (NFFRA)

**FY 2018 GR W/H:** N/A

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

No core changes

**HOUSE:**

No core changes

**SENATE**

**CONFERENCE:**

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.585												
NURSING FACILITY FED REIMB AL - 90567C												
CORE												
PROGRAM-SPECIFIC	329,042,684	0.00	326,254,109	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00
OTHER FUNDS	329,042,684	0.00	326,254,109	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00	351,448,765	0.00
TOTAL	\$329,042,684	0.00	\$326,254,109	0.00	\$351,448,765	0.00	\$351,448,765	0.00	\$351,448,765	0.00	\$351,448,765	0.00

MHD COST TO CONTINUE - 1886001													
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	9,506,238	0.00	6,859,814	0.00	0	0.00	
OTHER FUNDS	0	0.00	0	0.00	0	0.00	9,506,238	0.00	6,859,814	0.00	0	0.00	
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$9,506,238	0.00	\$6,859,814	0.00	\$0	0.00	
Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.													

TOTAL - NURSING FACILITY FED REIMB AL	\$329,042,684	0.00	\$326,254,109	0.00	\$351,448,765	0.00	\$360,955,003	0.00	\$358,308,579	0.00	\$351,448,765	0.00	
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## DEPARTMENT OF SOCIAL SERVICES

### Section 11.590      MO HealthNet Division – Department of Elementary and Secondary Education (DESE) Services

Book 6, Page 574

This section provides funding for the federal match related to DESE Medicaid services, including school based administrative services and Early Periodic Screening, Diagnosis, and Treatment (EPSDT) services.

**Legal Base:** N/A  
**Funding Sources:** General Revenue and Federal  
**FY 2018 GR W/H:** \$0

### CORE ADJUSTMENTS:

#### DEPARTMENT:

Core reallocation within:     $\pm$  \$1,125,000 FED PSD reallocated to EE within section to more closely align budget with planned expenditures

#### GOVERNOR:

Same as Department – no additional core changes

#### HOUSE:

Core reallocation within:     $\pm$  \$1,125,000 FED EE reallocated to PSD within section to more closely align budget with planned expenditures

#### SENATE:

#### CONFERENCE:

Committee Markup Annual		FY2019 DEPARTMENT OF SOCIAL SERVICES										Regular House Bills	
		FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
		DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.590													
SCHOOL DISTRICT CLAIMING - 90569C													
CORE													
EXPENSE & EQUIPMENT		0	0.00	1,125,000	0.00	0	0.00	1,125,000	0.00	1,125,000	0.00	0	0.00
FEDERAL FUNDS		0	0.00	1,125,000	0.00	0	0.00	1,125,000	0.00	1,125,000	0.00	0	0.00
PROGRAM-SPECIFIC		34,896,295	0.00	28,656,698	0.00	34,896,295	0.00	33,771,295	0.00	33,771,295	0.00	34,896,295	0.00
GENERAL REVENUE		242,525	0.00	188,815	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00
FEDERAL FUNDS		34,653,770	0.00	28,467,883	0.00	34,653,770	0.00	33,528,770	0.00	33,528,770	0.00	34,653,770	0.00
TOTAL		\$34,896,295	0.00	\$29,781,698	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00
TOTAL - SCHOOL DISTRICT CLAIMING		\$34,896,295	0.00	\$29,781,698	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00	\$34,896,295	0.00

DEPARTMENT OF SOCIAL SERVICES

**Section 11.595**      **MO HealthNet Division – Blind Pension Medical**

Book 6, Page 585

This section provides funding for a state only health care benefit for non-Medicaid blind individuals who qualify for the Blind Pension benefit.

**Legal Base:** RSMo 208.151, 208.152

**Funding Sources:** General Revenue, Health Initiatives (HIF), and Pharmacy Federal Reimbursement Allowance (PFRA)

**FY 2018 GR W/H:** \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

No core changes

**GOVERNOR:**

Core reduction: (\$1,607,627) GR PSD core reduction due to anticipated lapse

Core transfer out: (\$409,433) GR PSD core transfer out to HB 10 Department of Health and Senior Services

**HOUSE:**

Same as Governor – no additional core changes

**SENATE:**

**CONFERENCE:**

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.595												
BLIND PENSION MEDICAL BENEFITS - 90573C												
CORE												
PROGRAM-SPECIFIC	27,588,420	0.00	28,240,262	0.00	26,672,798	0.00	26,672,798	0.00	24,655,738	0.00	24,655,738	0.00
GENERAL REVENUE	25,668,198	0.00	25,668,198	0.00	26,672,798	0.00	26,672,798	0.00	24,655,738	0.00	24,655,738	0.00
FEDERAL FUNDS	1,004,600	0.00	1,004,600	0.00	0	0.00	0	0.00	0	0.00	0	0.00
OTHER FUNDS	915,622	0.00	1,567,464	0.00	0	0.00	0	0.00	0	0.00	0	0.00
TOTAL	\$27,588,420	0.00	\$28,240,262	0.00	\$26,672,798	0.00	\$26,672,798	0.00	\$24,655,738	0.00	\$24,655,738	0.00

MHD COST TO CONTINUE - 1886001												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	208,635	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	208,635	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$208,635	0.00	\$0	0.00	\$0	0.00

Corresponding FY19 NDI to a FY18 supplemental request for the additional cost of existing Medicaid programs.

Pharmacy PMPM Inc-Specialty - 1886011	0	0.00	0	0.00	0	0.00	250,493	0.00	248,444	0.00	0	0.00
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	250,493	0.00	248,444	0.00	0	0.00

	FY 2017 BUDGET		FY 2017 ACTUAL		FY 2018 BUDGET		FY 2019 DEPT REQ		GOV AS AMENDED REC		HOUSE RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.595												
BLIND PENSION MEDICAL BENEFITS - 90573C												
Pharmacy PMPM Inc-Specialty - 1886011												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	250,493	0.00	248,444	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	250,493	0.00	248,444	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$250,493	0.00	\$248,444	0.00	\$0	0.00
An increase is needed in the pharmacy program due to increased utilization and increased cost of specialty drugs. An estimated specialty PMPM rate of 7.82% is expected in FY19. Specialty drugs often target rare conditions, have limited availability and relatively high costs, require complicated regimens, and may involve unconventional manufacturing processes. Request reflects an Express Scripts forecast.												
Phrmacy PMPM Inc-Non Specialty - 1886012												
PROGRAM-SPECIFIC	0	0.00	0	0.00	0	0.00	29,433	0.00	0	0.00	0	0.00
GENERAL REVENUE	0	0.00	0	0.00	0	0.00	29,433	0.00	0	0.00	0	0.00
TOTAL	\$0	0.00	\$0	0.00	\$0	0.00	\$29,433	0.00	\$0	0.00	\$0	0.00
An increase is needed in the pharmacy program due to increased cost of non-specialty drugs. An estimated non-specialty PMPM rate of 1.15% is expected in FY19. Request reflects an Express Scripts forecast.												
TOTAL - BLIND PENSION MEDICAL BENEFIT:	\$27,588,420	0.00	\$28,240,262	0.00	\$26,672,798	0.00	\$27,161,359	0.00	\$24,904,182	0.00	\$24,655,738	0.00





DEPARTMENT OF SOCIAL SERVICES

**Section 11.605**      **Department of Social Services – Legal Expense Fund**

Book 1, Page 104

This section provides for the transfer of General Funds to Legal Expense Fund for the payment of claims, premiums, and expenses as provided by Section 105.711 through 105.726, RSMo.

**Legal Base:**            RSMo 105.711 – 105.726

**Funding Sources:**    General Revenue

**FY 2018 GR W/H:**    \$0

**CORE ADJUSTMENTS:**

**DEPARTMENT:**

Core reduction:            (\$1) GR TRF core reduction – eliminates funding for section

**GOVERNOR:**

Same as Department – no additional core changes

**HOUSE:**

Core restoration:            \$1 GR TRF core restoration

**SENATE:**

**CONFERENCE:**

	FY 2017		FY 2017		FY 2018		FY 2019		GOV AS		HOUSE	
	BUDGET		ACTUAL		BUDGET		DEPT REQ		AMENDED REC		RECOMMENDED	
	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE	DOLLAR	FTE
HOUSE BILL SECTION 11.605												
DSS LEGAL EXPENSE FUND TRF - 90599C												
CORE												
FUND TRANSFERS	0	0.00	0	0.00	1	0.00	0	0.00	0	0.00	1	0.00
GENERAL REVENUE	0	0.00	0	0.00	1	0.00	0	0.00	0	0.00	1	0.00
TOTAL	\$0	0.00	\$0	0.00	\$1	0.00	\$0	0.00	\$0	0.00	\$1	0.00

TOTAL - DSS LEGAL EXPENSE FUND TRF	\$0	0.00	\$0	0.00	\$1	0.00	\$0	0.00	\$0	0.00	\$1	0.00
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